

# Relatives as Parents

## PROGRAM

**A Resource Guide for Relatives Raising Children in Washington State**



## Acknowledgments

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Hilari Hauptman, *Coordinator*  
RAPP State Initiative  
Aging and Disability Services Administration  
Department of Social and Health Services (DSHS)  
Washington State

**This publication is dedicated to the tens of thousands of courageous and deeply committed grandparents and other relatives in Washington State – who give so much of themselves so that the children they raise may live safely and with a sense of belonging and family.**

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## History

Over the past 25 years, the number of children being raised by someone other than a parent has increased dramatically, with the vast majority of these children being raised by their grandparents. Nationwide there are more than 2.1 million children being raised solely by their grandparents or other relatives.

A lot has happened in the past several years to better meet the needs of the kinship caregiver families in this state. For example, in 2002, the Washington State Institute for Public Policy, wrote a dynamic report, titled *Washington State: Prevalence, Policy, and Service Needs*. Based on surveys and interviews of relative caregivers and the experiences of other states, the report describes the prevalence, challenges, and needs of kinship caregivers in Washington State and provides policy options to address those needs.

**You can read this report at <http://www.wsipp.wa.gov/>** under the Child Welfare heading.

Also that same year, the statewide Kinship Work Group was asked by the legislature to develop a report containing the “policy issues to be considered in making kinship care a robust component of the out of home placements spectrum”. Twenty-three recommendations in the areas of financial, legal, social services and systems change were put forth in a legislative report published in November 2002. **You can read this report at**

**<http://www1.dshs.wa.gov/legrel/pdf/Leg1102/KinshipCare.pdf>**. Over the past three legislative sessions five of the recommendations have been authorized including strengthening the relative search process, developing kinship navigator pilot projects, creating a kinship oversight committee, implementing a support services fund for kinship caregivers, and passing a law, SHB 1281, for kinship caregivers to provide consent for health care for the children they are raising.

## Kinship caregivers

Kinship caregiving is the full-time nurturing and protection provided by relatives for children who must be temporarily or permanently separated from their parents. If you are a relative raising a family member’s child, you are not alone. The 2000 census indicated that 35,341 grandparents in Washington State were the primary caregivers for their grandchildren. While

the majority of kinship care families are made up of grandparents raising their grandchildren, many other relatives – aunts, uncles, older siblings, tribal members, and godparents – are raising children.

Kinship caregivers come from all walks of life, all income levels, and all races. While each family's situation is unique, kinship care families share the need for information, services, and resources.

You may feel overwhelmed by the new role you have taken on as a surrogate parent. The financial, emotional, and legal concerns can be challenging. Finding answers to questions, attempting to locate services, and dealing with social service agencies and the legal system can be a long and frustrating process.

## **Relatives as Parents Resource Guides**

This *Resource Guide* is intended to help you and other Washington State families find the services and information they need while raising a relative's child. This *Resource Guide* will help you become aware of and find these services, as well as provide you with some general information as you take on the responsibility of raising a relative's child.

Throughout the *Resource Guide*, we use the term “child” to mean your grandchild, niece, nephew, sibling or other relative. We use the term “parent” to mean the person who is raising this child as the grandparent, aunt, uncle, sibling, or other relative.

In addition to this *Resource Guide*, the Children's Administration of the Department of Social and Health Services (DSHS) has published *A Relative's Guide to Child Welfare Services*, to assist extended family members to meet the needs of children in this situation. It provides valuable information to relative who are working with child protective services or child welfare services and discusses services children and their caregivers may be eligible to receive. To receive a copy, contact your Division of Children and Family Services social worker.

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## SECTION I

## Child Development, Health and Safety Needs

*It's been 26 years since Susan and Tom had a young child in their home and now they're caring for their 3-year-old grand child.*

*Mary and Jim made a decision not to have children of their own, and now they have a 7-year-old to raise.*

*Helen is a single, 36-year-old, career-minded woman, who is now planning a future for an 11-year-old nephew.*

*Many relatives raising children are concerned that they lack the knowledge and ability to raise a child. Some are raising a child for the first time. For others, it has been so long since they parented that they simply don't know current parenting issues. A lot has changed. New practices and new research may affect the way we raise and care for children.*



### Child Development

Every child is a unique individual, who thinks, looks, acts, and grows in a different way. Helping to raise a child to his/her potential as a human being is a very difficult and rewarding experience in the best of circumstances. Raising another's child may pose more challenges and extra worries. Children may have experienced traumatic events, frequent moves, and little or no stability in their lives. Physical and emotional traumas or a mother's substance abuse during pregnancy will impact developmental stages for children. Because of these and other factors, children frequently experience developmental delays and need special parenting to be successful in life.

## Early Brain Development

One important area where recent research has made a difference over the last several years, is in our understanding of early brain development. For information on early brain development and relevant parenting resources, go to the **BrainNet website at [www.brainnet.wa.gov](http://www.brainnet.wa.gov)**.

## Parenting Information

A parenting class or support group can make a real difference, even if you have raised children before. Sharing ideas, talking with others about raising children, and finding the support you need to do the best job possible is helpful. See Section VII about how to find a support group in your area.

The **Family Help Line**, sponsored by Parent Trust for Washington Children, provides a safe place for people to talk about their parenting concerns and to receive the support they need to become better parents. Anyone can call the Family Help Line and speak with a trained family support coach. Service is immediate, confidential, and free. **Call the Family Help Line at 1-800-932-4673** (Statewide) or **visit their website at <http://www.parenttrust.org>**.

**WSU Cooperative Extension** has a parenting website with extensive resources for parents and caregivers at <http://parenting.wsu.edu/>. Click on “Resources” button in the gray column at the left of every page to access resources.

Another particularly helpful resource is the **National Network for Child Care**. It is part of the Children, Youth, and Families Education and Research Network sponsored by the National Cooperative Extension System and the United States Department of Agriculture. Go to the “Information Station” button at [www.nncc.org](http://www.nncc.org) and find many resources on all aspects of child rearing.

**Resource Family Training Institute** provides training opportunities to relative and kinship caregivers and foster parents. Children who experience abuse and/or neglect or whose parents cannot care for them can be a challenge to caregivers. The Division of Licensed Resources (DLR) within the DSHS Children’s Administration (CA) has extended its training to relative and kinship caregivers. You can find out more information by **contacting your assigned Division of Children and Family Services (DCFS), the DLR Regional Training Coordinator, or at <http://fosterparent.dshs.wa.gov/>**.





## Special Needs and At-Risk Children

*James was very anxious as he waited for the report from the doctor on his grandson. Dean was only 5 years old and had already been exposed to more than any child should be. His father was in jail for selling and using drugs and his mother had disappeared. James wanted to do everything he could for Dean, but if Dean didn't "settle down", he knew he would need to find some professional help for them both.*

Children with special needs include those with physical or mental disabilities, emotional/ behavioral problems or are considered at-risk for developing disabilities. Children who may have been exposed to drugs and alcohol are considered at-risk and often develop symptoms that require further assessment and treatment.

There are many programs that can help families who are concerned about their child's walking, talking, crawling, vision, speech, hearing, or comprehension skills. Early intervention services exist for infants, toddlers, and preschool age children.

### Dealing with Emotional or Behavioral Problems

Every child has problems at some time. How do you know whether your child's problems are serious enough to warrant help? When evaluating your child's emotional or behavioral problems, you and the professionals working with your child should concentrate on two questions:

1. Is this behavior normal for my child's stage of development?
2. Are any of his/her main life areas affected including family and home, community and neighborhood, school, peers, and learning behavior?

### Warning Signs

If your child exhibits any of the following warning signs, you will want to get help from a professional in evaluating and treating him/her:

- marked personality change over time
- confused thinking
- prolonged severe depression, apathy, or extreme highs and lows
- excessive anxieties, fears, suspiciousness, or blaming others
- withdrawal from society, unfriendliness; abnormal self-centeredness
- denial of obvious problems; strong resistance to help
- thinking or talking about suicide
- numerous unexplained physical ailments, marked changes in eating or sleeping patterns

- anger or hostility out of proportion to the situation
- use of alcohol or drugs
- hoarding behavior, involving food, clothing, etc.
- change in school performance
- growing inability to cope with problems and daily activities such as school, job, or personal needs

## Mental Health Services

For crisis mental health services, look in the telephone book (usually inside the front cover) for a Crisis Clinic or Crisis Line. You can also ask the telephone information operator or call **1-800-446-0259 (the Mental Health Division/ DSHS-Consumer Affairs Line)** and ask for help in locating services. You can also visit their website at <http://www1.dshs.wa.gov/mentalhealth/>.

**Community Connectors** are parents and caregivers raising children with emotional, behavioral, or mental disorders. They provide support; share information; and assistance with problem-solving issues and information on local community resources. For more information, call **1-800-446-0259 extension 3**. **A Parent's Guide to the Public Mental Health System** is a booklet written by parents for parents. To order, call **1-800-446-0259, extension 3**.

To make an appointment for community-based out-patient mental health services, look in the Yellow Pages under “mental health” or “counseling”. Fees are often on a sliding scale basis and Medical Coupons may be accepted.

Families affected by mental illnesses can receive support from two organizations in our state that provide family support, educational events, web site information, recommended reading, and much more. **Advocates for the Mentally Ill-NAMI Greater Seattle** is a Seattle-based group that addresses unmet needs of mentally ill individuals and their families. **Contact Nami Greater Seattle at 206-783-9264 or 1-800-782-9264 or visit their website at <http://www.nami-greaterseattle.org>.**

## Where to Get Help

**Pediatricians** can do a thorough medical examination and can talk with you about whether your child's behavior is appropriate for his/her current age.

**Schools:** Anyone can request, in writing, that your child's school complete an evaluation on your child's need for special education services.

**Mental Health Professionals:** psychiatrists, psychologists, and other certified professionals can do a comprehensive evaluation of your child. This kind of evaluation may also be helpful to have in addition to other evaluations. Contact your local mental health center, or seek referrals from your child's school counselor, your clergy, or a friend or relative who has had counseling.

**Statewide Action for Family Empowerment of Washington (SAFE WA)** is a consortium of 12 organizations that provide information, support groups, advocacy, assistance with systems navigation, and training to parents and caregivers raising minor children with emotional, behavioral, or mental disorders. Most will provide a Parent Partner to attend meetings with parents and caregivers. **Contact SAFE WA at 1-866-300-1998.**

The **Division of Developmental Disabilities (DDD)** is part of DSHS. Individuals who meet DDD eligibility criteria may qualify for a variety of services and supports offered through the division. DDD assists individuals with developmental disabilities and their families to obtain services and supports based on the individuals' preferences, capabilities, and needs.

DDD believes that services and supports should promote everyday activities, routines, and relationships common to most citizens. DDD uses state and federal funds to provide or purchase supports and services for eligible persons and their families. Services include case management and may include the Infant Toddler Early Intervention Program (ITEIP) (see below), family support, respite, home and community support, medical services, employment, and community access. Resources are limited and needed services may not always be available. Services may vary from area to area. To receive direct information from DDD, call your local region or the **DDD State Office at 360-902-8444 (or 360-902-8455 TTY) or visit the DDD website at <http://www1.dshs.wa.gov/DDD/services.shtml>.**

**Infant Toddler Early Intervention program (ITEIP) – Birth to Three** is a program within DDD. Anyone who has a concern about their child's development (ages birth to 3 years) may request a screening or evaluation to see if the child is eligible for ITEIP services. A Family Resources Coordinator (FRC) will help families with concerns about their child's development, find services and information about early childhood development, find screening or evaluation services, and help make connections to community services. The FRC will also help coordinate all these services. ITEIP can be accessed through referral to a local Family Resources Coordinator. For program information and to locate the Family Resources Coordinator in your county, **contact the Infant Toddler Early Intervention Program at Healthy Mothers, Healthy Babies at 1-800-322-2588 or visit their website at <http://www1.dshs.wa.gov/iteip/>.**

**Children with Special Health Care Needs Program (CSHCN)** is a federal and state program for children who have a chronic illness or developmental concerns. CSHCN offers referrals, service coordination, information, and financial help for some medical care. There are CSHCN coordinators in county public health departments. Eligibility depends on family income and child's health status. **Call the Children with Special Health Care Needs Program at 1-800-322-2588 (ASK – Answers for Special Kids Line) to find your local CSHCN coordinator or go to the website at <http://www.doh.wa.gov/cfh/mch/CSHCNhome2.htm>.**

You can also call your county public health department. Look in the Government section of the White Pages in your phone book under “County listings” or “Health Services/Centers”.

**The Arc of Washington State** is a non-profit organization that promotes the education, health, self-sufficiency, self-advocacy, inclusion, and choices of individuals with developmental disabilities and their families. The Arc supports the following programs: Parent to Parent, the Family Educator Partnership Project, and community Advocacy Coalitions. **Contact The Arc of Washington State at 360-357-5596, from within Washington State only 1-888-754-8798, or visit their web site at <http://www.arcwa.org>.**

**The Arc of King County** has initiated a listserv for grandparents of children with developmental disabilities and chronic health conditions called “ListServ for Grandparents of Children with Special Needs”. Subscribers include both grandparent caregivers and involved grandparents who are not the primary caregiver. To subscribe, **send a blank e-mail to [gparenttogparent-subscribe@yahoogroups.com](mailto:gparenttogparent-subscribe@yahoogroups.com) or e-mail Jodi Reimer at [reimeroo@aol.com](mailto:reimeroo@aol.com) and she will input your name.**

## **Fetal Alcohol Syndrome (FAS) and Fetal Alcohol Effect (FAE)**

FAS is a birth defect syndrome caused by the child’s mother consuming alcohol during pregnancy. FAE children have some of the complications associated with maternal alcohol consumption. Not all children exposed to alcohol in utero are born with FAS/FAE, but these children are at-risk for FAS or other physical, cognitive, or behavior problems. Early FAS/FAE diagnosis can protect against secondary disabilities such as mental health problems, dropping out of school, trouble with the law, and substance abuse.

Five satellite clinics around Washington State and a core clinic site at the University of Washington in Seattle provide diagnostic and referral services through the **Fetal Alcohol Syndrome Diagnostic and Prevention Network (FAS DPN)**. The Network serves people of all ages (toddlers to adults) who have been parentally exposed to alcohol and have concerns about their learning or behavior. **Call the Fetal Alcohol Syndrome Diagnostic and Prevention Network hotline at 206-685-9888** and your request will be forwarded to the clinic closest to you. You can learn more about them **on the web at <http://depts.washington.edu/fasdpn/>.**

**Fetal Alcohol Syndrome Community Resource Center** located at **[www.come-over.to/FASCRC/](http://www.come-over.to/FASCRC/)** links to an on-line support group, books for children and adults, and other helpful information.

**The National Organization on Fetal Alcohol Syndrome (NOFAS)** publishes a valuable guide for caregivers raising children with FAS, entitled *Living with Fetal Alcohol Syndrome: A Guidebook for Families and Caregivers*. It can be ordered by **contacting T.J. Barcanic at [tj@nofas.org](mailto:tj@nofas.org)** or by **sending \$15 to NOFAS at 216 “G” Street NE, Washington, D.C. 20002 or calling 202-785-4585.**

***Journey Through the Healing Circle*** is a video series that helps parents and families deal with fetal alcohol syndrome. This award winning series is presented using traditional Native American storytelling techniques. Developed by DSHS the series is available from local libraries across the state. It is also available from the **Foster Parent Training Institute at 1-800-662-9111**. Books accompanying the video can be **downloaded from the website at <http://fosterparent.dshs.wa.gov/>.**

## **Attention Deficit Disorder (ADD) and Attention Deficit Hyperactivity Disorder (ADHD)**

ADHD is a diagnosis applied to children and adults who consistently display certain characteristic behaviors over a period of time. The most common behaviors fall into three categories: inattention, hyperactivity, and impulsivity. ADHD is the most commonly diagnosed behavior disorder in young persons, affecting an estimated three to five percent of school-age children.

For more information and resources related to ADHD and ADD, visit the **National Alliance for the Mentally Ill (NAMI)** website at **[www.nami.org/helpline/adhd.htm](http://www.nami.org/helpline/adhd.htm)**, the **National Resource Center on ADHD** website at **[www.help4adhd.org](http://www.help4adhd.org)**, or the **National Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD)** at **1-800-233-4050** or go to their website at **[www.chadd.org](http://www.chadd.org)**. For local resources, including local chapter and support group listings, **go to the Northwest CHADD website at [www.nwchadd.org](http://www.nwchadd.org).**

## **Children and Domestic Violence**

Even after an abusive parent has left, children may still be profoundly affected by the domestic violence they have witnessed or been the victim of. Children who experience violence in their homes may display a range of emotional and behavioral problems, physical disorders, and academic problems.

If a kinship caregiver believes that they or the children in their care are in immediate danger of violence, they should call 911 immediately. If a caregiver believes that domestic violence is likely to occur, they should **contact the Washington State Coalition Against Domestic Violence (WSCADV) for assistance at 1-800-562-6025.**

In some situations, the caregiver may want to consider asking a local court for a “protective” or “restraining” order, which makes it illegal for the person named in the order to come near the caregiver and/or the child. WSCADV can provide referrals to qualified domestic violence attorneys and free legal service providers.

For additional information and resources on the impact of domestic violence on children, **contact the Family Violence Prevention Fund at 415-252-8900 or [www.endabuse.org](http://www.endabuse.org).**

## Children with HIV/AIDS

HIV/AIDS may affect children differently than it affects adults. It is essential that a relative caregiver raising a child with HIV/AIDS have current, accurate information about effective treatment options, services, and new techniques for daily care. Caregivers may also want help in talking to child care providers or teachers about their child’s illness. **Contact the National Pediatric and Family HIV Resource Center at [www.thebody.com/treat/children.html](http://www.thebody.com/treat/children.html) or the Elizabeth Glaser Pediatric AIDS Foundation at 1-888-499-4673 or [www.pedaids.org](http://www.pedaids.org).**

## Family Support

There are many family support services that help parents and relatives who have a special needs child in their life. The following are just a few:

**Parent-to-Parent Support Program** provides emotional support and resource information about disabilities and community resources to parents when they learn that their child has a disability, illness, or chronic health condition, through a statewide network of Parent-to-Parent coordinators. **Call Parent to Parent at 1-800-821-5927 or visit their website at [www.arcwa.org/parent2parent.htm](http://www.arcwa.org/parent2parent.htm).**

**Sibling Support Project** is a national project for brothers and sisters of persons with special needs. SibShops are workshops that provide peer support for sibling’s ages six to thirteen. Workshops are also available for grandparents of children with special needs. For more information, **call Sibling Support Project or visit their website at <http://www.thearc.org/siblingsupport/>.**

## Other Helpful Resources for General Information on Child Development and Parenting Skills

**Doctors** – contact a pediatrician or clinic. They have many valuable resources and referrals for you.

**Hospitals** – many hospitals and Children’s Hospitals sponsor programs and activities relating to child development and parenting. Call your local hospital to find out if they offer such a program and request to be put on their mailing list.



**Libraries** – a great source for parenting books, audio/visual material and magazines, a librarian can help you locate a quick and easy-to-use reference on child rearing. Libraries are also a great resource for internet access if you do not have a computer at home.

**Community Colleges** – many community colleges have classes and workshops on child development and parenting, and parent support services. Look in the phone book for the Community College nearest you.

**Family and Community Support Centers** – many Washington communities have a Family or Community Support Center where, in one location, you can find several agencies that provide information for families. Some of the services you might find include parenting classes, child development training, childcare resource and referral, legal aid and public health.

## Washington's Guide to Immunization

(Source: Washington Department of Health)

It will be important to make sure all of your child's immunizations are current. The following table provides guidelines from the Washington State Department of Health about children's immunization needs. Boxes marked with an "X" indicate the ages at which various immunizations should be administered.

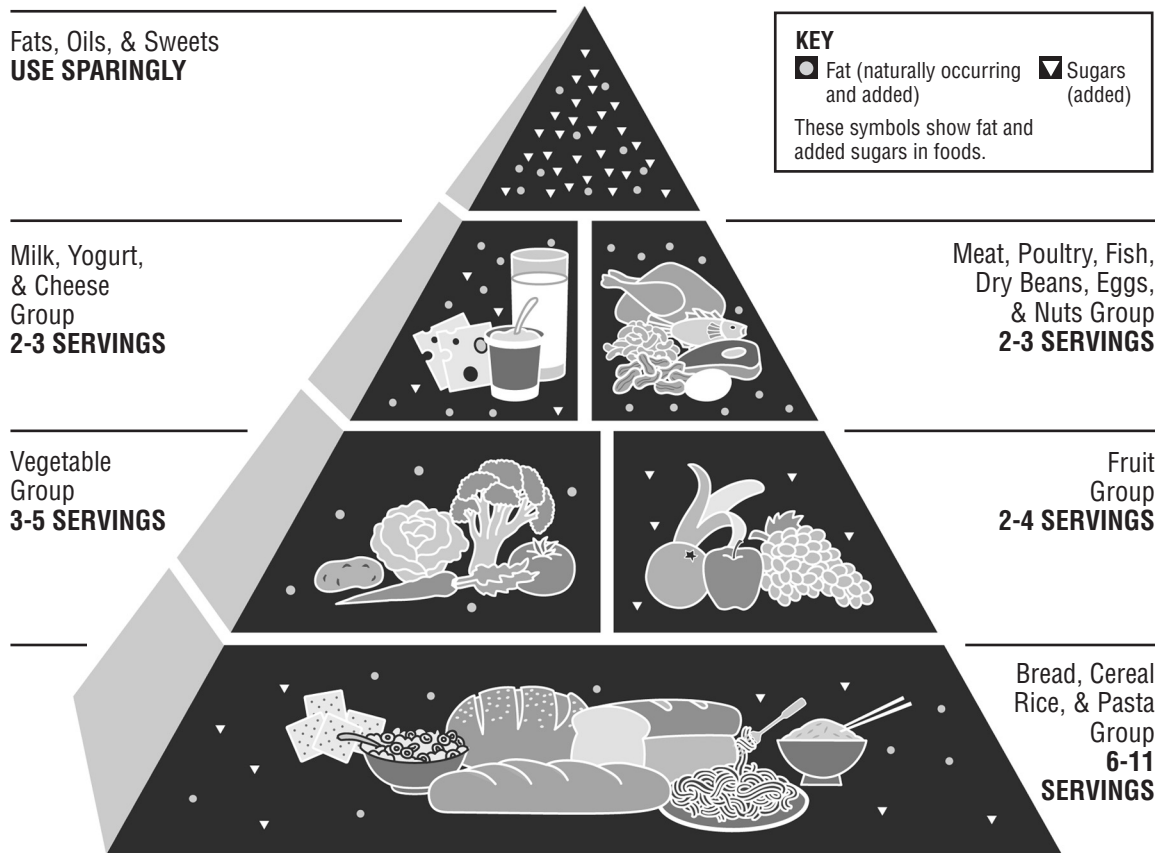
Immunization On Time For The best Protection From 10 Serious Diseases							
Vaccine	Hepatitis B	Diphtheris Tetanus Pertussis (DtaP/DTP)	Polio (IPV/OPV)	Haemophilus influenza type b (Hib)	Measles Mumps Rubella (MMR)	Tetanus Diphtheria (Td)	Viracella (Var)
Birth	<b>X</b>						
1 Month	<b>X</b>						
2 Month	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>			
4 Month	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>			
6 Month	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>			
12-15 Month	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>		<b>X</b>
16-18 Month	<b>X</b>	<b>X</b>	<b>X</b>				<b>X</b>
4-6 Years			<b>X</b>		<b>X or X</b>		
11-12 Years						<b>X</b>	
13-19 Years						<b>X</b>	

For more information on this topic, **visit the Department of Health website at <http://www.doh.wa.gov/cfh/Immunize/childhood.htm>**

## Nutrition and Healthy Eating Tips

Children learn from watching adults. If you practice good, healthy eating habits, it will be much easier for your child to do so as well. Establish a consistent eating routine. Keep healthy snacks on hand for your child and limit the amount of junk food and sweets. Read food labels carefully.

## Guide to Daily Food Choices



Use the Food Guide Pyramid to help you eat better every day... the Dietary Guidelines way. Start with plenty of breads, cereals, rice, and pasta; vegetables and fruits. Add two to three servings from the milk group and two to three servings from the meat group.

Each of these food groups provides some, but not all, of the nutrients you need. No one food group is more important than another – for good health you need them all. Go easy on fats, oils, and sweets, the foods in the small tip of the Pyramid.

## Food and Nutrition Resources

**Special Supplemental Nutrition Program for Women, Infants and Children (WIC)** accepts children under the age of five who are income eligible and have a nutritional risk. WIC provides nutrition education, counseling, and food vouchers

to pregnant mothers and eligible children. During the summer months, WIC participants have access to locally grown fresh fruits and vegetables through local farmers markets (see below). Relative caregivers can apply for this service for their children. For more information **call Women, Infants, and Children (WIC) at 1-800-841-1410 or visit the WIC website at <http://www.doh.wa.gov/cfh/WIC/Public.htm>.**

**The Child Nutrition Program** of the U.S. Department of Agriculture (USDA) provides free, or at a reduced price, healthy, nutritious meals through the National School Lunch and School Breakfast Programs. **Contact your local school or the Office of Superintendent of Instruction at 360-725-6200, or visit their website at <http://www.k12.wa.us/childnutrition>** to find out if your school participates in the USDA school meals programs.

**The Farmers Market Nutrition Program (FMNP)** provides locally grown fresh fruits and vegetables for WIC families and lower-income seniors and strengthens local economies and communities through the promotion of Washington State agriculture. WIC FMNP is part of the WIC Program. To be eligible for the FMNP, a family must be participating in the WIC program. The Senior FMNP is part of the Senior Nutrition Program which provides nutrition to lower income adults over age 60. To be eligible for the FMNP, seniors must be 60 or older and have an annual income at or below 185% of the Federal Poverty Income. **Contact WIC FMNP at 800-841-1410, Senior FMNP: at 800-422-3263, or visit the FMNP website at <http://nutrition.wsu.edu/markets>.**

For **information about food resources**, contact the statewide **Family Food Line at 1-888-436-6392**. The Family Food Line can provide information about the state's Basic Food program, free summer meals for kids, local food banks, and the Senior Farmers Market Nutrition Program.

Other helpful resources for information regarding food, special diets, and eating healthy include your local county extension office, hospitals, schools, and local public health departments.

**Washington State University** has publications on nutrition that can be **ordered through your county extension office or on-line at <http://pubs.wsu.edu/>**. You will find the on-line catalog under the Educational Materials button. You can also reach the **WSU Publications Center at 1-800-723-1623**. Local extension offices can be found in the government pages of the phone book under "county offices". Look for Cooperative Extension in the listing.

## Medical Check-ups

It is important for babies and children to have regular medical check-ups to make sure they are growing right and are healthy. These visits are a good way for your grandchildren to be screened for hearing or vision problems. Infants up to 18 months should have frequent check-ups, children from 18 months to school age should have a check-up once a year, and children of school age should have a check-up every other year. The following are some useful pointers:

- make sure your children know to tell you about any pains, even in his/her teeth and gums.
- teach children good health habits like brushing their teeth, and remember that they learn from you – so take care of yourself as well!
- to help your children understand why healthcare is important, read books about going to the doctor or dentist.
- make sure that vision and hearing tests are done during your children's regular medical check-ups.
- if you notice that your child is having trouble seeing or hearing, make an appointment with a healthcare provider.

A new Washington State law, Substitute House Bill 1281, enacted in 2005 allows kinship caregivers to provide informed consent for the children they are raising to health care providers. For more information, go to page 60.

## Dental Health – Keeping Your Children's Teeth Healthy

Did you know that good dental care begins before you can even see the child's first tooth? Infants need to have their gums wiped with a soft, damp cloth after each feeding. Never put a baby to bed with a bottle – the sugar in milk, formula, and juices can cause tooth decay before a tooth appears.

Teething. Children begin getting their first tooth sometime between four to nine months. Drooling, fussiness, and the need to chew on everything are usually signs of a baby who is teething. Pay close attention to what your child puts in his/her mouth while they are infants, and be sure to have lots of appropriate toys for them to chew on.

Arrange an appointment with a dentist when the child is three to four years old. Not only does this help you make sure their teeth are coming in correctly, but your child gets used to visiting the dentist on a regular basis.

The children's health care plans offered by the State of Washington, including the **State Children's Health Insurance Program (SCHIP), Medicaid, and the Basic Health Plan**, all cover dental services. Check with your dentist to confirm he or she is a provider under the particular health plan you have.

**The State Health Care Authority (HCA)** maintains a website that provides a list of all the clinics in Washington that provide dental (and medical) care for anyone covered by Medicaid. **Visit <http://www.hca.wa.gov/>** go to “Find a CHS-community health clinic in Washington”, enter your county, and you can get the address of the clinic nearest to you. The entry will indicate if the clinic accepts Medicaid patients for dental or medical or both.

**Access to Baby and Child Dentistry Program (ABCD)** provides dental care for children from birth to age six who receives Medicaid. Ask the County Health Department if there is an ABCD program where you live. **Contact 1-800-322-2588 (Ask Line) or visit <http://www.abcd-dental.org/>.**

If your child needs more complicated dental services that the clinic listed for your area can not perform, such as root canals, oral surgery, endodontic, or orthodontic work, **contact Connie Mix-Clark at 360-923-2753 or e-mail her at [clarkcl@dshs.wa.gov](mailto:clarkcl@dshs.wa.gov)**. Ms. Mix-Clark may also be able to tell you about which private practice dentists in your area accept Medicaid patients.

## Safety: Car, Home and Personal Safety

*Karen and Bill are on their way to pick up the grandchildren at the police station. As they are leaving, Karen looks around the house. It is in no way “childproof”. All her decorating accents and her comfortable living area now seem like accidents waiting to happen.*

Keeping children safe may seem like a full time job, and often it is. Here are some tips.

### Car Safety

- If your car has a passenger air bag, avoid carrying a child in the front unless the vehicle has an air bag shut-off switch that has been turned off.
- Never leave young children alone in a car, even for a few minutes.
- Always replace a child’s car seat that has been involved in a car crash.

### **Washington Child Restraint Law**

On July 1, 2002, Washington’s new Child Restraint Law went into effect. This law, also known as the Anton Skeen Act, is one of the strongest child restraint laws in the nation. It requires the use of booster seats for older children.

**Key provisions of the law:**

Children under the age of 16 years must be restrained in a vehicle according to the following steps:

- 1 year of age or under or weighing less than 20 pounds – a rear facing infant seat;
- 1 - 4 years old or 20 - 40 pounds or 4 - 6 years old or 40 - 60 pounds – a booster seat with a lap and shoulder belt;
- 6 years old or 60 pounds and greater – a seatbelt or a booster seat with a lap and shoulder belt.

Doctors and safety experts recommend that children ride in booster seats until the lap and shoulder belt fit right, usually when they are at least 4'9" tall, or around 8 years old or 80 pounds. As of July 27, 2003, tickets cost \$101.00 for each improperly restrained child, including if the child safety seat harness is not buckled, or if the older child has put the shoulder belt behind his back. Shoulder belts must be used with booster seats. If you do not have shoulder belts in your car, you are exempt from the requirements of the new law.



For information about choosing or correctly using a child care seat or booster, visit <http://www.800buckleup.org/> or <http://www.boosterseat.org> or call the Safety Restraint Coalition at 1-800-282-5587.

**Home Safety**

- Never let children play with plastic bags.
- Prevent poisoning by keeping all cleaning supplies, chemicals, medicines, and cosmetics out of reach or in childproof cabinets.
- Install smoke and carbon monoxide detectors and check the batteries twice a year.
- Hold a mock fire drill with your child – plan escape routes and arrange for a safe meeting place outside in case of fire.
- Never leave small children alone in or near water, including a bathtub.
- Make sure there are always life jackets to use in and around water.
- Keep all important numbers by every phone in the house including: ambulance, fire, your doctors, the nearest hospital's emergency room, and the nearest poison control center.
- Simmer food on the front burners and boil on the back ones. Turn all pot handles inward.
- Plug all electrical outlets with outlet covers when small children are around.



- Take a class in CPR, so you'll be better able to handle a situation if a child is choking or not breathing. Contact your local Red Cross for more information on classes.
- Bathrooms must have a lock that can be opened from the outside, in case a child locks him/herself in by accident.

If poisoning occurs or if you need information **call the Washington Poison Center at 1-800-732-6985 or 206-526-2121 or TDD 206-517-2394.**

For tips on child proofing or more information on poisoning in children see the **Poison Prevention website at <http://www.safebaby.net/childproofers/poisoning/>.**

## Personal Safety

Teach your children the following personal safety rules:

- memorize his/her full name, address, and telephone number, including area code and state.
- how to use the telephone, how to make calls to the operator, and how to dial emergency numbers.
- never to enter a stranger's car or home.
- to keep the doors locked and only admit people approved by you into your home.
- how to use a code word. A code word is a special word that only you and your children know. It is used if you need to have another person pick up your children so that they can verify that the person is safe.
- he/she is safer playing and walking with friends.
- never to wander away from you or your yard unless they tell you and receive permission.
- to tell you if something strange or uncomfortable happened to them.
- never to give information about themselves (including home telephone number) to anyone except those people approved by you.

## Reporting Abuse or Neglect

In Washington, anyone suspecting abuse or neglect of a child (or vulnerable adult) can **call the DSHS toll-free line 1-866-END-HARM (1-866-363-4276) at any time of day or night.** For more information, **go to the End Harm website at <http://www.dshs.wa.gov/geninfo/endharm.html>.**

The **Office of Family and Children Ombudsman (OFCO)** is an independent agency located in the Governor's Office. The agency's mission is to handle grievances and complaints regarding any state agency responsible for children in state care or regarding any agency that provides services to children and families due to allegations of abuse or neglect. This office assesses whether the state agency action or failure to act violates state law or agency policy and whether the

action was unreasonable and leaves a child at risk of harm. It does not advocate on behalf of the complainant. It does intervene, and presents recommendations to the agency. **Call 1-800-571-7321, or 206-439-3789 (TTY), or visit the OFCO web site at <http://www.governor.wa.gov/ofco>.**

## Staying Informed

**Child Advocacy Central** is a website for caregivers and professionals in Washington State. Here you will find information to help you navigate the child welfare system with confidence. You will learn how the system works for Washington's children, how to learn more, what to do if you are concerned about a child, and how to secure financial assistance for those in need.

**Visit [www.childadcentral.org](http://www.childadcentral.org).**

**Legislative Hotline** will help you stay informed on laws affecting your child's care and education. It is available for you to keep current on these and other issues. Hotline operators will pass on messages to the governor and to your legislators. They can also tell you what legislative district you live in and who your legislators are, help you locate legislative bills, tell you the status of a bill and send you a copy, and provide other information. **Call the Legislative Hotline at 1-800-562-6000 or visit their website at [www.leg.wa.gov/wsladm/default.htm](http://www.leg.wa.gov/wsladm/default.htm).**

**No Wrong Door** is a quick and easy web navigation tool for people needing information about social and health services, including those which can benefit relatives raising children and their families.

**Visit <http://www.dshs.wa.gov/basicneeds>.**

**The Relatives as Parents Program (RAPP) website** provides information on services, resources, legislation, support groups and legal resources.

**Visit <http://parenting.wsu.edu/relative/index.htm>.**

## SECTION II

## Child Care and Educational Needs

*Finding childcare wasn't how Bev had planned to spend her lunch hours. She knew her sister Susan was having difficulty with the children after their father died but she didn't think the situation was that bad.*

*When she received a call from Child Protective Services saying that the children had been abandoned, she knew she had to act fast. There was so much to do...and she couldn't take time away from her job. Bev needed to find a place for the children to stay while she worked, and she needed that place by Monday morning.*



### Child Care – Determining What is Right for You and Your Child

Finding child care is a concern for parents and caregivers. There are several different types of child care:

- **In-Home care** – a child care provider provides care in your home.
- **Family childcare** – care is being provided in a caregiver's home. You will want to be sure the provider is licensed.
- **Child care centers** – care is provided in a facility that is licensed by the State.

### Finding the Right Type of Care

There are many pros and cons to the different types of child care. You may find it helpful to make a list of your child care needs (do you need care on a regular basis, drop in, during regular working hours, at odd times) and what is offered by available child care providers (hours open, individualized attention, trained workers, planned activities, etc.) to help you decide which is best for your family. Talk to other parents, grand-parents, co-workers, etc. Ask them if they know

the place you are considering. Ask lots of questions. You may want to visit prospective child care providers unannounced.

**You Have A Choice** was recently created as a special website for caregivers seeking child care in Washington State. A consumer information guide is available which gives parents tips on choosing child care as well as other relevant information at <http://www1.dshs.wa.gov/esa/dccel/carechoices.shtml>.

**Washington State Child Care Resource and Referral Network** is a network of 17 community-based, private, nonprofit, child care resource and referral agencies across the state. Contact them to find licensed child care in your community that matches your needs. For more information on child care and other family support resources, including financial assistance, **call your local Child Care Resource and Referral Agency, call the Washington State Child Care Resource and Referral Agency at 1-800-446-1114, or visit their website at <http://childcarenet.org/>.**

For additional guidance on choosing the right care situation for your child, **contact Child Care Aware at 1-800-424-2246 or [www.childcareaware.org](http://www.childcareaware.org), or the National Child Care Information Center at 1-800-616-2242, or [www.nccic.org](http://www.nccic.org).**

## **Working Connections Child Care (WCCC)**

This program helps families pay for child care expenses while the parent/caregiver in the family is working, looking for work, or working and going to school. Some rules of the program are different for relatives-as-parents. For example, even if only one adult of a relative caregiver couple is working, they are eligible for a WCCC subsidy. Note that WCCC is not designed to provide respite for caregivers, nor is WCCC subject to time-limits – it is not a “welfare” program. To find the specific program rules, **visit the website at <http://www.dshs.wa.gov/esa/dccel> or at <https://www2.wa.gov/dshs/onlinecso/WCCC.asp>.**

The WCCC subsidy is available for eligible children from infant to twelve years of age and up to eighteen years if the child has special care needs. An enhanced rate may be available to a child care provider if a child of any age has special needs. All families must pay a portion of the child care cost, called a “co-payment.” The minimum co-payment is \$15 per month. Generally, only the income of the child is counted when the child is residing with a non-parent adult; exceptions are when the adult has court documents to indicate financial responsibility or the child has been adopted.

Parents or caregivers choose their own child care provider. WCCC pays providers in licensed family child care homes or child care centers. Even if your provider is unlicensed, a WCCC subsidy may be available.

## Early Childhood Education

Early childhood education programs offer a range of activities to help pre-school children develop physically, socially, emotionally, and mentally. Activities are based on the children's age and change as children get older. Head Start is a popular, federally-funded program for children ages three to five in lower-income families. Early Head Start offers care for infants and toddlers.

**Contact the Early Head Start National Resource Center at 202-638-1144** or [www.ehsnrc.org](http://www.ehsnrc.org) for information about Early Head Start and links to local programs.

## Enrolling in Public School

To enroll your child in school you need a:

- Birth Certificate (if starting kindergarten);
- proof of Immunization;
- school Records (if transferring to a new school).

Call your local school district office (listed in the white pages of your phone book) to get the name and address of the school your child will attend. The district office will tell you how to register your child. Schools have forms for requesting past school records and immunizations. School personnel can help you fill out the necessary forms and get documents. Be sure to tell the school staff of your role in the child's life and your commitment to the child.

Being in school is not easy these days for any youngster. Think of all the new kinds of information kids have to learn now that you did not when you were in school. And there are so many more ways to learn. Life, in general, is more stressful now and this stress filters down to the classroom and schoolyard.

You are probably aware that most families, even in the most ideal settings, experience problems as their children go through school. You may face these as well. Knowing what to expect as your child enters or goes through school, and knowing what resources are available, will help you work through any school-related issues. Be a strong advocate for you and your child.

## Supporting Your Child's School Experience at Home

- Talk positively about the school experience.
- Show interest in what your children are learning.
- Help your children apply learning to everyday life – let them teach you!
- Avoid the “grade trap” – learning is what's important, not just grade.
- Develop realistic expectations.

- Provide a quiet place and time for homework.
- Offer to help with homework but don't do it for them.
- Read with your children.
- Develop a consistent and effective discipline plan.

## Interactions with Teachers, Counselors, and School Staff

*Sylvia kept postponing the visit with her nephew's fifth grade teacher. How could she tell the teacher that the reason she is not involved in Marty's homework is because she doesn't understand it? Sylvia was not only intimidated by the schoolwork, but she also feared embarrassing her nephew at school.*

**Here are some tips for working with school staff:**

**Get to know your child's teachers.** Inform teachers that you are raising your relative. Teachers can be more helpful when they are aware of family situations. Let the teacher know you want to be informed of your child's progress. Keep the lines of communication open between you, your child, and the teacher.

**Attend open houses and meetings.** Try to attend all parent-teacher conferences. Schedule personal meetings with teachers and counselors to talk about your child. If you cannot make face-to-face contact, arrange for a telephone conference.

**Get help with homework if needed.** Teachers may be able to get your child extra help with homework or tutoring. This may take place at the school or in the community. Let them know if you are having trouble finding time or simply do not understand the homework well enough to help your child.

**Do not be embarrassed or ashamed** if you do not understand your child's homework. Many adults have trouble with reading, writing, math, computer work, and other subjects. Remember, it is in the best interest of your child to ask for, and receive, help.

## Individual Education Plan (IEP)

An IEP is created for children and youth ages three to twenty one with special needs. The written plan spells out the kinds of services, therapies, and/or accommodations that will be made to help your child in an educational setting. Every child receiving special education services has an IEP. Parents or guardians should be involved in the process and should receive their own copy of the IEP in order to track progress and to maintain home records. If you need records regarding your child's special education services, **contact the Special Education Coordinator for your school or the school district's legal counsel.**





You can request the handbook *Special Education and the Law – A Legal Guide for Families and Educators* by **contacting the Office for the Superintendent of Public Instruction at 360-725-6075** or at **[http://www.k12.wa.us/SpecialEd/pubdocs/special\\_education\\_law\\_guide.pdf](http://www.k12.wa.us/SpecialEd/pubdocs/special_education_law_guide.pdf)**.

Another valuable resource is the handbook *Make a Difference in a Child's Life: Educational Advocacy – A Manual for Helping Children and Youth Get What They Need in School – Advocating for Children and Youth Who are Out of Home or In Foster Care*. To register for a free advocacy workshop and receive the manual free, **call Team Child** (a legal advocacy program for youth) **at 206-322-2444**. You can also access the manual **on the website: <http://teamchild.org>**. The manual was made in partnership between Team Child and Casey Family Programs.

## **Mediation in Special Education**

When parents and school personnel disagree about the education program for a student (age 3-21) in special education, either party may request mediation. Mediation helps parents and school personnel resolve conflicts and clarify issues. If your child has disabilities and you need assistance with mediation, call the state sponsored **Mediation in Special Education at 1-800-692-2540** or **206-842-2298**.

**Washington Parents Are Vital in Education (PAVE)** provides parent training and information, including one-on-one support, training, and resources for parents of children with special learning needs, and workshops (for groups of five or more) on issues related to services in school for children of all ages with special needs. **Contact PAVE at 1-800-572-7368 or 253-565-2266** (voice/TTY) or **visit their website at <http://www.washingtonpave.org>**.

**The Learning Disabilities Association of Washington** provides services and support for children and adults with learning disabilities and their families. **Contact 1-800-536-2343 outside of King county** or at **425-882-0792**.

**REMEMBER** ...Schools are providing services to you and your child. They are there to help. Use these resources often!

## SECTION III

## Common Issues Facing Older Children

*Ana and her friends were good children. They did well in school and never got into trouble. Les and Cathy were proud of their child, but still they didn't understand why she needed to dress the way she did – baggy pants, stomach showing and, of all things, a tattoo. This wasn't the way things were when they were younger.*

Things are different today. Children are exposed to drugs, alcohol, sex, gangs, and violence at early ages. Your child's history might include some of these experiences. As a result, she/he may not see certain activities or language as inappropriate.

Many relatives are raising children who are developmentally deprived, but socially advanced. For example, a child may have trouble reading on a third grade level but have the survival instincts or "street-smarts" of an older teenager. The events that led up to your child being placed in your home may warrant a special approach.

We encourage you to talk to a counselor or family therapist. Check with your children's school for additional information and for referrals on getting help. Talking with a professional can be very helpful in dealing with children.

### Alcohol and Drug Abuse

Today young people are exposed to alcohol, tobacco and drugs early – often in elementary school. The younger someone starts to use alcohol and drugs, the more likely she/he is to develop problem behaviors associated with such use.

***The number one reason children give for not taking drugs is that a caring adult does not want them to!***



You are in an ideal position to make a difference in your child's life.

- Help your child deal with peer pressure. Be willing to listen and talk about their need to belong and fit in.
- Help your child build positive social relationships. Friendships are very important. Know your child's friends. Be aware of unsupervised situations.
- Help your child learn coping skills to deal with disappointments. Talk with them about sad and angry feelings that arise when things do not work out as planned.
- Help your child build self-esteem. Success achieved through social, academic, or extracurricular activities is helpful. Address learning problems with the child's teacher.
- Identify activities that help them relax and feel good. Music, art, or sports activities can help a child let off "steam" in a healthy way.
- Have honest and open discussions about drugs. Get informed! Let your child know he or she can come to you for help and information.

If your child does make a mistake, help them get back on track. Get help from a well-regarded children's drug treatment program in your area. Early treatment can nip destructive patterns in the bud.

Your continued belief in their ability to make the right choices in the long run will help them internalize the values you are giving them.

***Five Reasons Young People Give for Using Alcohol, Tobacco and Illicit Drugs:***

- 1) To feel grownup.
- 2) To satisfy curiosity.
- 3) To fit in and belong.
- 4) To relax and feel good.
- 5) To take risks and rebel.

For more information about drug/alcohol abuse and prevention **call the Alcohol/Drug 24 Hour Helpline at 1-800-562-1240** or visit their website at **<http://www.adhl.org/>**. Young adults who are experiencing a personal crisis in their lives may contact the **Washington State TeenLine at the same number or at 1-800-722-4222** (for Seattle residents only). You can also find resources in your local Yellow Pages under "Alcoholism Information and Treatment" or "Drug Abuse Information and Treatment."

**The At-Risk/Runaway Youth Program at the Division of Alcohol and Substance Abuse (DASA)** within DSHS provides information and referral to parents or caregivers and youth needing chemical dependency services. DASA's services can be paid for with medical coupons and DASA has "hardship funds" that can help caregivers with travel and lodging expenses while a youth is in treatment. **Contact Ruth Leonard at DASA at 360-438-8079.**

**ALA-TEEN for teens and ALA-NON for family and friends** are self-help groups based on the Alcoholics Anonymous model. Meetings facilitate connection with others who have similar problems and issues. **Call the 24-hour help line for more information at 1-800-454-8966.**

**The Substance Abuse and Mental Health Services Administration (SAMHSA)** of the federal Department of Health and Human Services offers a number of resources that would be helpful for relatives caring for at-risk or chemically-dependent youth. **Visit SAMHSA's Alcohol and Drug Information website at <http://ncadi.samhsa.gov> or call 1-800-729-6686.** Check out the *Family Guide to Keeping Youth Mentally Healthy and Drug-Free*.

**The Children of Alcoholics Foundation (COAF)** is a national non-profit foundation that provides a range of educational materials and services to help professionals, children, and adults break the intergenerational cycle of parental substance abuse. COAF has a special initiative, *The Ties that Bind Parental Substance Abuse and Kinship Care* aimed at kinship caregivers, with fact sheets **posted on their website at <http://www.coaf.org/family/caregivers/kinmain.htm>.**

## Substance-Abusing Parents

Although there are many paths that lead to children being cared for by relatives, no single issue is nearly as pervasive as birth parents' chemical dependency issues.

*First*, chemical dependency is a disease, a behavioral health issue, and is treatable. It is not a moral failing and does not make the chemically dependent person a "bad person." In your own thoughts, and in your conversations with your child, focus on the parents' behavior, leaving your own moral/ethical views out of it. Although this may be hard to swallow at times, it is helpful to maintain this stance in your role as alternate caretaker for your child.

*Second*, in almost all cases, your child will continue to love his/her birth parent(s) and want to be with them, at least for frequent visits. Support your child's love for his/her parent(s). To do anything else would be cruel and could damage that child's relationship with you. It could also have serious long-term effects for the child, such as reducing the child's ability to form intimate, loving relationships. Again, focus upon the parents' behaviors and the way those behaviors affect their ability to provide the best possible care for the child. And your children always deserve the best!

*Third*, chemical dependency is treatable, but it commonly takes multiple attempts at treatment to be successful. Support the parents' efforts to achieve sobriety, but remember to protect your child as well. Hold strictly to all conditions the court or treatment provider may impose upon the parent. This includes not allowing a visit if the parent arrives with alcohol on his/her breath or is apparently "under the influence" – even if it is a "special day" such as a

child's birthday. Most treatment programs require clients to abide strictly by such orders. To let the parents "slide" only defeats the parents' efforts to achieve sobriety and in the end works against the best interests of the child.

And, *fourth*, be sure to deal appropriately with your own and the child's feelings about the parents' chemical dependency. The breadth of feelings, which may arise, is nearly endless – including anger, guilt, envy, suspicion, hurt, sorrow. Seek help in exploring these feelings and finding where they come from so that you can work to resolve the internal and external conflicts, which these feelings may create or inflame.

Consult the resources listed in this *Resource Guide* for help with these issues, including **COA (Children of Alcoholics)** groups, Al-Anon, relatives as parents support groups, and individual treatment providers. Many of these resources can work well with older children. For younger (pre-teen) children, whose abilities to identify and give voice to their feelings may be quite limited, peer groups or private therapists working with such methods as "play therapy" may be the best resources.

Here are some specific suggestions about how to relate to substance-abusing parents:

- *Always* treat them with as much respect as you can muster (you're not a saint, but do your best).
- Do *not* lay "guilt trips" on them. It won't work to stop their substance abuse and in fact could push them toward relapse, which they then will blame on *you*.
- Love them, despite their substance abuse.
- Be firm with them while communicating to them that you care about their recovery – allow *no* "sliding" on their treatment or court rules.
- *Always* present them to your child as doing the best they can to be loving parents, but who have an illness to conquer.
- Do all you can to communicate openly with the parents no matter how often your efforts to do so are turned aside.
- And always remember that the parents surely are hurting in many ways – guaranteed – no matter what façade they may present.

## Coping with Parent Visits

*Kevin's mom said she was coming on Saturday, and that the two of them would go out for pizza and to a movie. He passed up a birthday party for her; and his mom did not even show up.*

*Last week, Kevin's mom came to visit but all she wanted to do was use his grandmother's washing machine and take a nap. Kevin suspected that his mom may have had too much to drink. He said his mom smelled bad. Kevin is tired of waiting for her and he knows she does not act like a mom anyway.*

It is important to establish clear rules for the parents. Firmly communicate that they:

- Make arrangements for a visit with only you, not with the children.
- Arrive on time or call to explain their delay.
- Arrive sober. If not, they will not be allowed in the house or to see the children.
- Are to spend time with their children – that is the purpose of the visit.

### **Tips for Dealing with Parental Visits**

- Do not tell the children about the planned visit until a sober parent shows up at the door.
- Have some of the children's favorite games, toys, or books ready for the visit.
- Do not leave the children alone with the parent unless you are sure it is safe to do so.
- If the visit goes well, encourage the parent to visit again and thank them for spending time with the children.
- Record in a journal the date, time, place, and content of the visit.
- Consider using a visitation center or alternative location if you are seeing that the parent's visits produce conflict or stress.



### **Preparing Children for Unsupervised Visits with Parents**

Each year, 350,000 kids are victims of abduction by non-custodial parents. There are a number of things you can do now to help reduce the risk of abduction or, if it should occur, to help get your child safely back home. Practical suggestions include:

- Teach her/him your telephone number complete with area code.
- Practice making long-distance, collect calls.
- Encourage your child to call you anytime they are uncomfortable, day or night.
- Teach her/him how to dial 911, and when to use it.
- Make sure he/she knows your first and last name.
- Have her/him memorize your address.
- Tell her/him you would never agree to their parent or a stranger taking them.
- Let her/him know that you will always keep looking for them if they disappear.
- Pick a code word known only to you and the child.



- Advise her/him never to go with their parents unless you've told them about the visit.
- Designate someone else the child can call if you aren't available.
- Tell her/him if it feels wrong, do not go.
- If the non-custodial parent is not rooted in the community, try to get supervised visits.
- Write down the parents' car license number, color, make, and year.
- Keep names and numbers of the parents' family, friends, and employers.

***If you have legal custody, you may:***

- Specify in custody orders, "No out-of-state travel without written permission and police or the FBI will be involved if violated."
- File for a denial of passport, if you are concerned the parents may leave the country with the children. **Contact Passport and Advisory Services at 111 19th St, N.W., Suite 260, Washington D.C.** You need to include the court order and case number.
- If your child is taken, call police and your family law attorney immediately!
- Have current photos of the children and both parents to give to the police.
- Write down physical descriptions of children and parents for the police.

## **Gangs and Violence**

***Tips for Preventing a Child's Involvement in a Gang***

- Make sure your child does not feel they "need" a gang.
- Show your love of the child through hugs, reassurance, etc.
- TALK and LISTEN to your child.
- Supervise her/his activities. Help get them involved in positive activities.
- Get to know the child's friends and their families.
- Place a high value on EDUCATION. Help them do their best. Do everything possible to prevent them from dropping out of school.
- Talk about values and why you think gangs are dangerous. Discuss the violence, drug dealing, hatred, and the likelihood of law enforcement action that is the result of these activities. Make sure you listen, not just lecture.
- Make sure you are a parent first, not necessarily a buddy.

***Warning signs that your child might be involved in a gang or gang activity***

- Changes in types of friends.
- Changes in dress habits, such as wearing the same color combination (example: red for Piro/Bloods; blue for Crips; black for Latin Kings, etc).

- Gang symbols on books or clothing.
- Being secretive about their activities and whereabouts.
- Having extra cash from an unknown source.
- Carrying a weapon (they might say it is for “protection”).
- Declining interest in school and family.
- Problems with law enforcement.

If you notice these patterns, get help. Intervention may prevent the situation from getting more serious. Contact the school counselor or the police department. Most police departments have juvenile gang specialists. When a child gets into trouble with the law DO NOT make excuses for their behavior!!!

**The National Youth Violence Prevention Resource Center** provides information for parents and other caregivers on violence in schools, youth violence prevention programs, teen suicide, and strategies to foster healthy youth development. **Contact the Center at 1-866-723-3968, or 1-800-243-7012 (TTY), or visit [www.safeyouth.org](http://www.safeyouth.org).**

## Sex and Youth

You may have difficulty talking to your child about sexuality. Most parents do. However, kids learn about sex early in their lives. They may get information at school, from their friends, or through television or music. It is important that they get accurate, timely, and appropriate information from you.

### ***Tips to help you talk to your child about sexuality:***

- Find out your child’s questions and concerns.
- Know the facts about sexually transmitted diseases, AIDS, birth control, and pregnancy, or refer your child to someone you trust who does.
- Talk about the things you see on TV or in the community that deal with sexuality. Ask your child how he/she feels about certain topics.

For further information on talking to your children about sexuality issues, **contact Planned Parenthood at 1-800-230-7526 or visit their website at <http://www.ppww.org/index.html>.** They have useful booklets such as *Talking with Your Children about Sexuality*. Local health and family planning clinics and counselors at your children’s school may offer additional information and resources.

## Communication Tips

Good communication creates a win-win situation for both children and their caretakers. Learning good communication skills helps children (and adults) develop confidence, feelings of self-worth, and good relationships with others.

- Demonstrate good listening skills when you speak with your child. Give your undivided attention when your children want to talk to you – don't read, watch TV, fall asleep, or make yourself busy with other tasks.
- Practice listening and talking – talk with your children about school, friends, and how they feel about things.
- Respect your children. If you talk to your children as you do your peers, they will be more likely to tell you when things are right or wrong in their lives.
- Praise your children for doing things right. Praise builds a child's confidence and reinforces communication. Unkind words tear children down and teach them that they just aren't good enough.
- Children are never too old to be told they are loved. Saying and hearing "I love you" is important at any age.
- Remind them of your rules. Just saying "no" is not good enough. Younger children often need reminders.

## Culture and Tradition

Family rituals and traditions provide a sense of security and predictability in a child's life, especially when there has been a great deal of instability in a child's family. The child may enjoy creating their own ritual or giving ideas for family rituals. Rituals help family members develop an identity and a sense of belonging. These traditions develop memories that can last a lifetime. Special foods on certain nights, bedtime and wake up routines, birthdays and holidays, all lend themselves to family rituals and traditions. The hairstyles, dress, and language of today's children and teenagers might try the patience of adults for whom cultural traditions are important. Grandparents and other relatives need to be sensitive to their children's need to look, dress, and act like others their age.

## SECTION IV

## Special Issues Facing Children in Kinship Care

*Ann says her grandchildren seem to have many emotions that her now adult children never experienced when they were growing up. Ann is trying to sort out and identify their feeling so she can do the best job she can to help them.*



### Understanding Children's Issues

Because of what has happened in their lives, children not being raised by their biological parents and being cared for by kin or friends of the family may experience a variety of emotions.

#### ***Abandonment***

Young Scott was left at the neighbors, and his mom never returned. Scott's grandma came to get him, and brought him to her house. Scott was very scared that he would lose his grandma and grandpa, too. At first, he would not let them out of his sight. Scott even became very nervous when they went into the bathroom. He thought his grandma and grandpa might disappear down the drain. He does not know where his mom is, and he has heard nothing from her. Scott does not know if she will ever come back for him.

#### ***Grief and Loss***

Billy had just made a new friend in his neighborhood when Billy had to move to his aunt's house. He was even on a soccer team, and now he cannot play. Billy's mom just packed him up one night and left him at her sister's house. She forgot to pack Billy's favorite bear and his pillow. To make it worse for Billy, at least in his eyes, his aunt, who used to let him get away with stuff before he lived with her, makes Billy go to bed on time and complete his homework before he is allowed to watch T.V.

### ***Low Self-Esteem***

Little Andrea wonders what she did wrong. She thinks she must be really bad if her own mom does not want her. Andrea wonders if she is stupid or if something else is wrong with her. What particularly upsets Andrea is that her mom is keeping her new baby, but not Andrea.

### ***Fear and Insecurity***

Marcus lays awake at night, worrying that his mom will not ever come back for him. At the same time, Marcus worries that she will return for him. What will happen then? Marcus is getting used to not being hungry, and he does not miss the beatings. He also worries about what will happen to him if his aunt gets sick or goes away. Where will he go?

### ***Anger***

Sam punched his grandma today. He cannot explain what came over him. Sam said he felt like he would burst if he did not punch someone. His grandma was there, and it was easy to take out his anger on her. Marcus feels terrible about what he did. He loves his grandma, and knows she did not deserve it. Marcus is really mad at his mom; but he cannot show his anger to her because she is not there.

### ***Confused Feelings***

Jenny says she hates her mom but, at the same time, she misses her very much. Jenny wants to go home, but she does not want to leave where she is now living. Jenny wonders if her mom could move in with her grandparents and her. Sometimes, Jenny questions if they are keeping her from her mom. But, Jenny knows her grandparents are very good to her and love her a great deal.

Jenny also gets confused by other feelings, because her mom's boyfriend used to touch her in ways she did not like. When Jenny thinks about that, she gets real mixed up inside. She wishes she could get those thoughts out of her head.

## **Common Behaviors of Children in Kinship Care**

- School difficulties (poor grades, difficult behavior).
- Does not pay attention for long, cannot concentrate.
- Will not let the caregiver out of sight, clings to the caregiver.
- Reverts to babyish behavior like thumb sucking and bed wetting.
- Will not sleep alone or with the light off.
- Eats too fast, too much, or hides food.
- Takes care of brothers and sisters like a parent should.
- Behaviors are often worse after a parent's visit.
- Exhibits inappropriate sexual behavior.

## Tips for Helping Children

- Give them affection the child can count on.
- Provide regular meals.
- Have a set bedtime routine.
- Give the child structure so they know what to plan on.
- Reassure the child you will not leave him/her.
- Let the child know they are safe.
- Allow the child to talk about their feelings.
- Help the child understand they are not to blame for the situation.
- Give positive reinforcement and praise.
- Let the child know all feelings are okay, even mixed-up feelings.
- Let the child know you, too, have confused feelings sometimes.
- Reward the behaviors you want to see again.
- Be clear about what is expected.
- Catch the child being good and praise that behavior.
- Let them know you will always love them, even when they are mad or angry.

*Through the Eyes of a Child* is a useful series of nine fact sheets for grandparents raising grandchildren (birth to age eight) on child development, family relationships, communication and the importance of contact with birth parents. For free copies or to read or download, **visit the University of Wisconsin Cooperative Extension website at [www.uwex.edu/relationships/index.html](http://www.uwex.edu/relationships/index.html).**

## Communicating with Children about Their Parents

*Joe is at a loss with what to tell his grandchildren about their parents. The children seem to idolize their parents, despite what the children have suffered at their parents' hands. Joe does not want to badmouth the children's mom and dad, but neither does he want to lie to them.*

Children who live with grandparents or relatives usually have strong feelings about their parents. Grandparents/relatives who build a good relationship with the children's parent(s) will have more success in getting the child to open up about their feelings.

Children love to play and often can play out their feelings. Activities that can help a child to open up about their feelings including: walks in the park, board games, baking together, playing with a doll house, building with blocks, play dough projects, and drawing.



Reading together is another activity that can draw a child and an adult closer together and build trust and a sense of belonging so the child will share feelings. There are many excellent award-winning books. Ask a librarian to suggest a few books on your child's reading level that you can read to and with the child. Ask for books that address the feelings of loss, separation, anxiety and fear.

Older children and youth like to watch movies. Movies that you preview for appropriate content can be good discussion starters. Look for wholesome movies that deal with parent-child relationships, loss, or separation. Make some popcorn and watch the movie together. After the movie spend some time discussing the movie, talk about how it made them feel, and how it made you feel.

When talking to the children, consider the following guidelines:

- Do not lie to children.
- Tell the truth, but tell only as much as the child really wants to know and can understand.
- Never bad-mouth the parent when the child is around.
- Explain the parents' problems as kindly as you can.
- When children ask those tough questions, it is okay to make such statements as, "I don't know"; "I don't know where your mommy is"; or "I don't know when Dad is coming back."
- If a parent is a drug user, talk about it by making such statements as, "Your dad uses drugs, and that makes him too sick to take care of a little girl."
- If a parent does not show up for a promised visit, nurture that child with comments, such as, "I know you feel bad because Mommy didn't come, but you're safe with me"; or "Sometimes Daddy's sickness makes it hard for him to remember."
- Find something – anything – good you can truthfully say about the parent.
- Always reassure the children that the situation is not their fault.

## **Relationships with Incarcerated Parents**

Many grandparents and other relatives are raising children because their parents are in prison (incarcerated). Incarceration presents many challenges for kinship families. In addition to the daily tasks of raising children, caregivers also find themselves responsible for making sure the children maintain a healthy relationship with their incarcerated parent. Because the isolation of incarceration can make this relationship very difficult, kinship caregivers may need support from organizations that have a special understanding of this situation.

**The Family and Corrections Network** is a national organization that offers resources and referrals for kinship caregivers and others with incarcerated family members, including a directory of programs in each state. **Contact the Network at 434-589-3036** or at [www.fcnetwork.org](http://www.fcnetwork.org).

**American Friends Service Committee's Criminal Justice Program** provides information, support and referrals for prisoners and their families. **The program can be contacted at 215-241-7130** or at [www.afsc.org](http://www.afsc.org).

**Center for Children of Incarcerated Parents** provides counseling and support services for prisoners and their families, training for incarcerated parents, caregivers of prisoners' children and professionals working with offenders. **The Center can be reached at 626-449-2470** or at [www.e-ccip.org](http://www.e-ccip.org).

**The National Institute of Corrections (NIC)** offers extensive information and resources for prison inmates, including a website with a list of state and local programs for female offenders and their children. The list and other resources are available at **1-800-877-1461**.

The **Offender Preparation and Education Network, Inc (OPEN)** provides self-help books and other parent and family resources for offenders and families of offenders. For more information **call 972-271-1971** or **visit their website at [www.openinc.org](http://www.openinc.org)**.

**The Girl Scouts Beyond Bars** program helps facilitate regular visitation for girls whose mothers are in prison. For more information about this program, which is available in 22 states including Washington, **call 1-800-478-7248** or **visit the Girl Scouts website at [www.girlscouts.org](http://www.girlscouts.org)**.

**Assisting Families of Inmates (AFOI)** provides tips on how to prepare a child for a visit with a parent in prison. **Contact AFOI at 804-643-2401** or **visit their website at [www.foi.org](http://www.foi.org)**.

## Children and Grief

No parent can protect children from losing someone they love or shield them from mourning that loss. For some children, the loss is caused by the death of a loved one. In other cases, especially for many of the children being raised by kin, that special someone is lost to an illness, prison, or to the streets. No matter what caused the loss, children grieve. Although their feelings may be similar to those of adults, how children express their grief depends on their age, their relationship to the person who is gone, and the part that person played in their lives. How others around them grieve is important as well. Understanding how children grieve can help you to help them.

## What Kinship Caregivers Should Know

Grief is more than the feeling of loss. It brings with it disruption and change in the child's life. As a result, children have to cope with: a sense of unreality – which may stay with them for a long time – and a sense of feeling unsafe. Nothing is the same as it was before.

Not only have they lost that special person, but they may also have to go to a different school, move to a different place to live, or take on new responsibilities. Suddenly they are faced with unfamiliar feelings, like fear, anger, and sadness, with which they have little experience. You can meet your grandchildren's needs by remembering the three C's – **Care, Continuity, and Connection**.

**Care** – your children need to know that someone will support them, feed them, and give them a home.

**Continuity** – your children need to know that they can trust the person taking care of them, that others around them will not leave, and that there is some stability through these changes in their lives.

**Connection** – your children need to have their loss acknowledged. They need to be part of the giving and receiving of comfort within the family. They need to talk about the relationship with the person they have lost, both the good and the bad.

Children experience loss differently, depending on their age and stage of development.

**Pre-schoolers (ages 1-5)** feel the loss but do not have the words to say what they feel. They usually express only one feeling at a time; they can be happy or they can be sad, but not at the same time. They may have lost someone who held them together, directed them in the world, gave them things, and made them feel safe.

**Primary school children (ages 5-10)** recognize the extent of their loss and are fearful of the changes they see associated with it. For them to feel safe and whole they need to learn that there is some continuity between the past and the present. They lost someone who may have done things for them and with them. Children in this age group can begin to talk about their own needs and feelings, but often they do not think before they act.

**Pre-adolescents (ages 10-13)** understand more about what they lost, have words for their feelings, and can recognize what the person who is gone did for them and the difference he or she made in their lives. They may try to be more grown up than they really are.

**Adolescents (ages 13-18)** can reflect on their own behavior and the meaning that the loss has on their lives and the lives of others in the family. They may try to take over the roles and responsibilities of the person they have lost. They can see the person they lost as someone with his or her own needs and who has, in some way, lost something too. They can talk about how their own personal history will be different because of the loss.

## How Caregivers Can Help

Most adults feel uncomfortable talking about death or loss, especially with children. We know we can't "fix" their pain, and because we are afraid of saying the wrong thing, we often say nothing. But children often find that the silence of adults deepens their confusion. The availability of a loving parent or other caring adult can be very helpful to children who have suffered a loss. The following tips may help you assist your child cope with a loss:

- **Be honest** – Their lives have been shaken and your honesty will help rebuild their sense of trust.
- **Be open about your own sorrow** – Your grief lets your children know that it's okay for them to cry and be sad. Let them comfort you as you comfort them. Help them find outlets for their feelings, perhaps through sports, arts, or talking.
- **Encourage questions** – Understand that children often need to ask the same questions over again as they reach different ages and stages. They may need to hear over and over again what is happening, how you will manage, and the nature of the changes taking place.
- **Consider an activity that helps children remember and honor the person they have lost** – They might want to make a scrapbook, a photo album, or a memory box, or tell or write a story. The activities children find helpful change over time as children grow. Let them decide what they want to do and what works for them.
- **When the loss is through death, use the words "death," "dead," and "dying"** – Using concrete words allow adults as well as children to be open and honest and avoids disguising the truth.
- **Allow, but don't force, children to attend funeral services or viewings.** If they do wish to attend, prepare them for what they will see and hear. If they are primary school age or younger, have someone they trust stay with them during the service to explain what is happening, to comfort them, and to answer questions. Older children and adolescents may be able to take a more active role in these rituals.



Grief is a process, not a single event. The best thing caregivers can do for grieving grandchildren is to give them the tools to cope. Being there for them provides the support they need as they work out new ways to deal with the major and permanent changes in their lives caused by loss.

**The National Center for Grieving Children and Families** at the Dougy Center in Portland, Oregon, offers useful resources including a directory to locate services in your area and a variety of publications. **The Dougy Center can be reached at 503-775-5683 or on-line at [www.dougy.org](http://www.dougy.org).**

**The American Academy of Child and Adolescent Psychiatry** offers fact sheets on a variety of issues related to grief and loss **through their website at [www.aacap.org/publications/factsfam/index.htm](http://www.aacap.org/publications/factsfam/index.htm).**

## SECTION V

## Financial Assistance

*Ann Marie made a modest living, but only enough for herself. Anything left over at the end of the month was used to help cover her mother's care in the nursing home. How could she possibly financially care for her granddaughter who was now living in her home? Her savings were depleted yet she knew others were counting on her.*



### DSHS Services and Support

DSHS provides services through county offices and may provide cash grants, food assistance, medical coverage, child protective services, respite or therapeutic day care, family reconciliation services, and help with housing costs, and child support services. Look in the Government section of the White Pages in your phone book under “State”, then under “Social and Health Services”, **or call Constituent Services at 1-800-737-0617** or **visit their website at <http://www.wa.gov/dshs/>**. This number and website will direct you to information about all DSHS programs.

### Temporary Assistance for Needy Families (TANF) Cash Assistance

TANF provides financial assistance in the form of a monthly check to help families care for children. You may be able to get benefits through TANF while you care for a child until they reach age 18 if you are a “Relative of Specified Degree,” you can get TANF for either just the child’s needs (a “child-only” or “non-needy” grant) or for your needs and the child’s needs together (a family or “needy” grant).



A relative of specified degree includes parents and the following relatives by blood, marriage, or adoption: siblings, first cousins (including first cousins once removed), nephews, nieces, and persons of earlier generations (including aunts, uncles, and grandparents) as shown by the prefixes of great, great-great, or great-great-great.

If you are not related to the child, but are a court-ordered guardian or custodian, you can get benefits for the child only. Non-related adults acting “in place of the parent” (in loco parentis) may also be eligible.

To apply for benefits, you must complete an application (in-person or on-line), sign over child support rights to DSHS (see Child Support section below), and complete an interview (in-person or by phone). To apply in-person, **locate your local Community Service Office (CSO) by calling 1-800-865-7801 or on-line at <https://www2.wa.gov/dshs/onlinecso/findservice.asp>**.

**To apply on-line, go to <https://www2.wa.gov/dshs/onlinecso/applying.asp>.**

Whether you apply in-person or on-line, you can apply for cash, medical, food assistance, and child care at the same time, individually or in any combination.

## **TANF “Child-Only” (Non-Needy) Grant**

If a child’s parents do not live in the home and the child lives with a “relative of specified degree”, court ordered guardian, or court-ordered custodian, the person caring for the child may apply for TANF benefits for the child only. DSHS counts the income and resources of just the child when they determine if the child is eligible for benefits. There are no “WorkFirst” participation requirements or time-limits for child-only grants. In order to be eligible, children between the ages of 16 and 18 must be in school.

For information specifically about TANF child-only grants, **visit [https://www2.wa.gov/dshs/onlinecso/Non\\_Needy\\_Relative\\_Grant.asp](https://www2.wa.gov/dshs/onlinecso/Non_Needy_Relative_Grant.asp)**.

Relatives applying for child-only TANF grants should expect to be asked for the following information. If you need assistance getting any of these documents, let your caseworker know.

- Proof of the child’s age, such as a birth certificate, baptismal record, or school document.
- Proof of the relative’s relationship to the child – in many cases, the caseworker can get this information from public records, but it is advisable to bring in any documentation you have. For example, if you have a birth certificate for the child showing their parents’ names, then you just need to establish your relation to one of the parents.
- Social Security Number for the child.
- If the child has any income or resources of their own, these must be reported and documented as well. (remember that for child-only grants, the caregiver’s income or resources are irrelevant, and you should not be required to report or document this information).

## TANF Family (Needy) Grant

The TANF family grant is available for a “relative of specified degree” who wants financial help for the child and themselves. DSHS counts the income and resources of the relative and the child when they determine if the family is eligible for benefits.

When a relative gets TANF with the child, the relative must participate in the WorkFirst program and the family is generally limited to 60 months of cash benefits in their lifetime. Extensions beyond 60 months are available in some cases. This lifetime limit does not apply to food assistance or medical benefits.

## Child Support Services

Even though you may be caring for your relative’s child in your home, the child’s parents are still financially responsible unless or until their parental rights are terminated by a court. This means that if you receive public assistance (in the form of a TANF grant, medical assistance, or foster care assistance) on the child’s behalf, the Division of Child Support (DCS) will automatically provide services. DCS can also provide child support enforcement even if you do not receive public assistance; we call this a “nonassistance case.”

## Division of Child Support Services (DCS)

DCS can provide the following child support services *at no cost to you*:

- **Establishing paternity** so that the child has a legal father. This process can help develop the child’s medical and family history, and help the child qualify for public or private programs such as Social Security or other dependent benefits. For more on Paternity Establishment see Chapter VII.
- **Establishing and collecting child support.** DCS will locate an existing order (divorce decree) or enter a support order if none exists. DCS sets support obligations based on a parent’s ability to pay. If circumstances have changed, the child support order may need to be modified. DCS then works to collect child support.
- **Providing medical support.** DCS will attempt to have the parents cover the child on their own medical insurance.

For information on all DCS services, **visit the DCS website at <http://www1.dshs.wa.gov/dcs/index/shtml> or call 1-800-442-KIDS.**

## Public Assistance Cases

When you accept a public assistance grant and/or medical assistance for a child in your care, you assign the medical assistance and child support rights to DSHS. Assigning your support rights means you agree that DSHS can keep any child support collected to repay the state and federal government for the cost of the assistance paid for the child. After you terminate public assistance, DSHS will send you child support collected while the child lives in your household.

You must cooperate with the child support process to be eligible to receive most public benefits, unless you can justify a claim for “good cause” not to cooperate with DCS. When you apply for TANF or Medical Assistance, you should tell DSHS if you believe that collecting child support might be harmful for the child in your care. You can request “good cause” not to collect child support if you believe DCS services will cause harm to the child in your care. Talk to your TANF/medical worker about claiming “good cause”. If the CSO determines that the risk of harm is too great, DCS will not even open a child support case.

The CSO may ask you for, or help you obtain, supporting evidence, such as:

- birth records, medical records, police records, or other records about the safety claim;
- information about adoption proceedings;
- your sworn statement if no other proof is available.

## **Nonassistance Cases**

You may find that taking care of a child presents not only an emotional and living-arrangement impact, but a financial one as well. You may decide not to apply for TANF or Medical Assistance or to become a foster parent. You can still apply for and receive DCS services free of charge. DCS calls this a “nonassistance” case. All of DCS’ services are free to you. DCS does not deduct any administrative charges from your child support payments, but there may be some charges if the child’s parent resides in another state. In a non-assistance case, you receive the child support payments while the child is in your household. You may request that DCS close your case at any time, and may also ask to reopen the case later.

## **Foster Care Cases**

When DSHS Children’s Administration places a relative child (grandchild, nephew/niece, etc) with you, it is referred to as a “relative placement”. Whenever a child is placed in foster care, federal law requires that a referral be sent to DCS, to begin collecting child support or to get medical insurance from the child’s parents.

A foster parent may request that the Children’s Administration claim “good cause” not to cooperate with DCS in their foster care case, similar to the “good cause” claimed in TANF cases, as described above. Good cause reasons in foster care cases include, but are not limited to, domestic abuse, the child was conceived as a result of incest or rape, the child is developmentally disabled, adoption proceedings are pending in court, or financial hardship by paying child support would delay or prevent family reunification. In foster care cases, DCS provides the same services described on page 40 for TANF or medical assistance cases.

If you are licensed as a foster home, you will receive financial and medical help from Children’s Administration for the child placed in your care. In that case, you are not eligible for TANF or TANF-related Medical assistance for that child. Child support collected while a child is in foster care does not go to the licensed foster parent directly, but to the State to reimburse foster care money expended for the child. If child support exceeds the monthly costs of care, the excess is put in a trust fund to be used in the best interests of the child as determined by the Children’s Administration. To find out more, **ask your Child Welfare Worker about the Office of Accounting Services (OAS) Trust Fund.**

## DCS Can Help the Child’s Parents

If the child’s parents cannot afford to pay the child support they owe, they should contact their DCS worker. Child support amounts and payment plans can usually be modified to reflect the parent’s circumstances, but the parents must work with DCS and provide the information needed to make that decision. Situations such as being unemployed or working full-time but at low wages may be reason to adjust amounts owed or the schedule of payments. If the parent’s child support debt seems unreasonable or overwhelming, a DCS Conference Board may help to write off part or all of the debt due to hardship and/or inability to pay.

In addition, if the parent is receiving disability benefits, sometimes there are dependent benefits available for the child. These dependent benefits, when paid to the child’s caretaker (or to the state in TANF cases), are treated as payments on the parent’s child support obligation. Let DCS know if the child’s parents receive any kind of benefits.

## Other Financial Assistance for Kinship and Relative Caregivers

### Foster Care Reimbursements

To receive foster care reimbursements, the relative needs to become a licensed foster parent. When DCFS determines that a child can not remain in his/her home due to abuse, neglect, or risk of harm, it may be necessary to remove the child from their home or make the child a “dependent” of the State of Washington.

When a child is placed with a “relative of specified degree”, the relative can apply to become a licensed foster parent for that child. This means meeting health, safety, space, training, and other licensing requirements. Once licensed, the relative will receive foster care reimbursements and medical benefits for the child. Additional services, such as childcare, respite, and therapies may be available.



To begin the foster home licensing process, call **Families for Kids Recruitment Resources at 1-888-794-1794**, or **contact the child's DCFS social worker**.

## **Special Needs Adoption Support**

The Adoption Support Program assists families adopting children with special needs by providing on-going financial and medical benefits to qualified children based on state and federal regulations. To qualify for Adoption Support, DSHS must have made the determination that adoption is in the child's best interest. The child must:

- be less than 18 years of age when DSHS and the adoptive parent sign the Adoption Support agreement; and
- be legally free (birth parents' rights have been terminated); and
- have special needs (see definition below); and
- be in state-funded foster care (or eligible for and likely to be placed in foster care), or be eligible for federally-funded adoption assistance.

### ***Special Needs Children***

To be considered a child with "special needs" each of the following statements must be true.

1. One or more of the following factors or conditions must exist:
  - The child is of an minority ethnic background; or
  - The child is six years of age or older at the time of application for adoption support; or
  - The child is a member of a sibling group of three or more or of a sibling group in which one or more siblings meet the definition of special needs; or
  - The child is diagnosed with a physical, mental, developmental, cognitive or emotional disability; or
  - The child is at risk for a diagnosis of a physical, mental, developmental, cognitive, or emotional disability due to prenatal exposure to toxins, a history of serious abuse or neglect, or genetic history.
2. The state has determined that the child cannot or should not be returned to parent's home; and
3. A reasonable but unsuccessful effort was made to place the child for adoption without adoption support. (Other unique conditions may exist in which a child would qualify. Almost every child in the state's Foster Care program qualifies for Adoption Support).

For more information, call **DSHS Children's Administration Adoption Support Program at 1-800-562-5682**. Note that in the near future, the Children's Administration will be creating regional "resource centers" to provide post-adoption support. Services may include information and referral, support groups, and parent education and training.



## Relative Support Services

**Relative Support Services** may be available if the child in your care has been placed with you by DCFS. You may be eligible for assistance for emergency, short term supports. This assistance can be used to help pay for emergent, extraordinary costs incurred at the time of placement, or after placement if the lack of immediate support would lead to disruption of the child's placement in your home. For more information **contact your DCFS worker**.

## Kinship Caregivers Support Program (KCSP)

Kinship caregivers who are not involved with the formal child welfare system, may be eligible for a new **Kinship Caregivers Support Program (KCSP)**. The program is designed to help grandparents and other relatives (of any age) who are raising children with costs for items like car seats and clothes. The program also helps to link these caregivers with other sources of financial support such as utility discounts and food stamps. To find out your local contact point for the KCSP, **call Aging and Disability Services Administration at 1-800-422-3263** or **find your local Area Agency on Aging office and phone number at <http://www.adsa.dshs.wa.gov/resources/aaa.htm>**.

## Food Assistance (Basic Food)

**The Basic Food program** can help you stretch your family's food dollars. Eligibility for this program depends on the size of your household and your total household income. You don't have to get a TANF cash grant to get Basic Food, and there are no time limits for working families to receive this help. Basic Food customers now use a card that works like a debit card for buying food. This card is quick and easy to use! For information about the Basic Food program, **contact your local DSHS Community Service Office or visit [https://www2.wa.gov/dshs/onlinecso/Food\\_Assistance\\_Program.asp](https://www2.wa.gov/dshs/onlinecso/Food_Assistance_Program.asp)**.

The Basic Food program has detailed rules about what income is counted and what expenses can be deducted. When you apply, check with the worker to make sure you get any allowable deductions.

## Insurance and Medical Coverage

*Betty was already worried about her own medical bills before taking on her grandchildren. After all, Medicare only covers so much. She knew she couldn't afford private insurance for her grandson living with her. A grandparent in a similar situation told her that medical coupons were often available to children. Betty was embarrassed at the thought of applying for assistance, but there wasn't anything else she could do – the children needed medical care.*



## Private Insurance

Many relative caregivers have difficulty obtaining health insurance for their children. Relative caregivers that are retired are often on Medicare. Caregivers who are still working may find it difficult (if not impossible) to add relative children to their employer-based policy. As a result, many caregivers seek Medicaid for their children. If you have employer-based health insurance, ask about dependent coverage for children in your custody.

## Medical Assistance (Medicaid)

Children being raised by relatives are almost always eligible for Medical Assistance (Medicaid or Medical ID cards) even if they are not receiving a TANF child-only grant. The child in your care is automatically eligible for Medical Assistance if:

- the child is receiving a Child-Only (Non-Needy) TANF grant, or
- the child is a “dependent of the State”.

To apply for Medical Assistance for your child, you will need to identify yourself as their primary caregiver. Be prepared to show proof of your child’s age (such as a birth certificate) and Social Security number. As with applying for a TANF child-only grant, you will be asked about your child’s income and resources **but not about your own**. You do not need to have legal custody for them to receive Medical Assistance. Even if you are not sure the child will qualify, you should apply anyway. Your child may receive much-needed services like regular check-ups and immunizations, prescription drugs, dental care, vision and hearing care, outpatient and hospital services, and more.

In some cases, relative caregivers may be eligible to receive Medical Assistance for themselves. If you also need medical coverage for yourself, be sure to ask at the time you apply for your child. Your eligibility will be based on different criteria, including your own income and resources.

If your child is eligible for Medical Assistance, you will be mailed a medical identification card every month. The card is sometimes called a “coupon.” You need to take this card with you whenever they have a medical visit. Medical providers are **not** required to accept Medical Assistance (Medicaid) as a payment source. Therefore before the appointment, call the doctor’s office or clinic to make sure they accept Medicaid.

For information on Medical Assistance and eligibility requirements in Washington State, **contact your local Community Service Office** (see TANF section on page 38) or **call the Medical Assistance Customer Service Hotline at 1-800-562-3022**. Applications for medical assistance only (without cash or food assistance) can be downloaded at

**[http://www1.dshs.wa.gov/dshsforms/forms/14\\_380.pdf](http://www1.dshs.wa.gov/dshsforms/forms/14_380.pdf)**.

If you receive Medical Assistance for your child, a referral is automatically sent to the Child Support Division to enforce any medical insurance available for the child through the parent's medical insurance policy. At the same time, you may also request full child support services from DCS. If you are afraid that enforcing medical support or child support may be harmful for either you or the child in your care, talk to your DSHS worker about claiming "good cause." For more about child support see the Child Support section page 40).

## State Children's Health

**The State Children's Health Insurance Program (SCHIP)** may be available to your child if they are not eligible for Medical Assistance. SCHIP has a low monthly premium at \$15 for one child and no more than \$45 for three or more children. Covered services are the same as for regular Medical Assistance.

**Contact Healthy Kids Now at 1-877-543-7669 or visit their website at <http://www.insurekidsnow.gov>.**

## Basic Health Plan

**The Basic Health Plan of Washington** is offered through the State of Washington's Health Care Authority. It offers affordable, comprehensive health care coverage. You pay for coverage through monthly premiums and co-pays at the time of service. The amount of co-pay depends on the type of service you receive. The amount you pay monthly depends on your age, family size, income, and the health plan you choose. **Call 1-800-826-2444 or call 1-360-923-2701 (TTY)** for more information on the Basic Health Plan and to request an application or **visit the website at <http://www.basicealth.hca.wa.gov>.**

## Statewide Health Insurance

**Benefits Advisors (SHIBA)** is a free health insurance information resource for all Washington residents including those who need to make decisions about individual insurance, government programs (Medicare, Medicaid, Basic Health Plan, State Children's Health Insurance Program, etc.), Medigap, employment related benefits, managed care, long-term care, medical billings, fraud or abuse, and more. Trained volunteers counsel about rights and options as health insurance consumers. Services are confidential and convenient. **Contact**

**SHIBA at 1-800-397-4422 or visit the Insurance Commissioner's website at <http://www.insurance.wa.gov/consumers/shiba/links.asp>.**



## Federal Benefits

### Social Security Benefits

You may be eligible for additional Social Security benefits if you have adopted your child prior to activating your own Social Security benefits. In addition, if you have custody of your child and the parents of the child are disabled or deceased, the child may be eligible for Social Security benefits. Social Security, and some other dependent benefits, may qualify as payments on the parent's child support obligation, as well.

**Contact the Social Security Administration at 1-800-772-1213** for further information or **visit their website at <http://www.ssa.gov>**.

### Supplemental Security Income (SSI)

If your child has a disability, he/she may qualify for Supplemental Security Income (SSI). When deciding if a child is disabled, the Social Security Administration looks at whether the child has serious limits on his/her ability to function. Parents or guardians can apply for children under the age of 18 who are blind or who have a disability.

***You will need to provide the following information when applying for SSI:***

- your child's social security card or a record of their social security number;
- your child's birth certificate or other proof of age;
- the names, addresses, and telephone numbers of doctors, hospitals, and clinics that have seen your child; and
- proof of your child's U.S. citizenship or eligible non-citizen status.

For more information or to apply for SSI go to your local Social Security Office, or **call Social Security at 1-800-772-1213** or **1-800-325-0778 (TTY)**, or **visit their website at <http://www.ssa.gov>**.

### Family Leave to Care for a Child

Under the federal Family and Medical leave Act (FMLA), you may be entitled to take up to twelve weeks of unpaid leave per year if your child needs care due to a serious health condition. This law applies if your employer has at least 50 employees and you have been employed there for at least twelve months.

### Income Tax Benefits

You may also be eligible for certain income tax benefits. Be sure to check with the Internal Revenue Service (IRS) or a tax advisor if you have any questions.

### Dependency Exemption

If a relative provides over half of a child's support during the year, the relative may be able to take the exemption for dependents on that year's income taxes. The IRS may ask for proof that you are supporting the child, so make sure to keep receipts and a list of expenses.

## Earned Income Tax Credit (EITC)

Another income tax benefit that may be available to you is the “earned income tax credit.” The EITC is a special benefit for low and moderate income working people who are raising children. The EITC is a tax credit program administered by the IRS. You file for the EITC when you file your tax return. There are also Advance Earned Income Tax Credit (Advance EITC) payments available that allow those who qualify to get part of their EITC in advance instead of waiting until after the end of the year.

The EITC program provides qualified working relatives with assistance by:

- reducing the amount you owe or giving you money back if you owe taxes; or
- giving you a cash allotment if you owe no taxes.

To obtain forms, assistance, and qualifying information on the Earned Income Tax Credit **contact the IRS at 1-800-829-1040 or visit their website at [www.irs.gov/individuals/index.html](http://www.irs.gov/individuals/index.html)** (click on “EITC”).

## Child and Dependent Care Tax Credit

The Child and Dependent Care Tax Credit may offer credit for childcare expenses. The amount claimed depends on your personal income and the amount paid for childcare in a calendar year. Use IRS Form 4221, “Credit for Child Care and Dependent Care Expenses”.

**The AARP Tax Aide Program** is a useful resource for relative caregivers. This program is a free, high quality service provided by IRS-trained and certified volunteers. Volunteer counselors provide individual tax-preparation to people of all ages with middle and low incomes (with special attention given to those ages 60 and older). It is a useful program if your tax burden has changed after a change in the status of a dependent. AARP Tax-Aide sites are located in places convenient for taxpayers to get to, such as libraries, senior centers, and malls. Volunteers can also visit taxpayers in their homes if they are physically unable to visit a site. The program is available from February 1 – April 15 each year. For more information, **contact AARP at 1-888-227-7669 or visit their website at [www.aarp.org/taxaide/](http://www.aarp.org/taxaide/)**.

## Housing Assistance

One of the most common challenges facing relative caregivers is finding and staying in appropriate housing. Some may be threatened with eviction from senior public housing when they take in young children. Others live in apartments that are simply too small to accommodate children safely. Few relative caregivers have the financial resources to afford larger homes that can accommodate additional family members, and most affordable family housing is designed for younger, more physically fit parents. The following groups provide housing information or services that should be helpful for kinship caregivers.

**The Fair Housing Information Clearinghouse** provides national and local information and links to fair housing resources. For more information, **call 1-800-343-3442** or **visit their website at [www.hud.gov/offices/fheo/index.cfm](http://www.hud.gov/offices/fheo/index.cfm)**.

**Generations United (GU)** has information on innovative Grand Families Housing Replication Projects in several states, including Tacoma, Washington. **Contact GU at 202-638-1263** or **go to their website at [www.gu.org](http://www.gu.org)** and click on “Kinship Care,” then on “Fact Sheet.”

**The National Low Income Housing Coalition** provides advocacy and information. The Coalition can be reached at **202-662-1530** or at **[www.nlihc.org](http://www.nlihc.org)**.

**The U.S. Department of Housing and Urban Development (HUD)** provides information on who qualifies and how to apply for federally subsidized housing programs. **Contact HUD at 202-708-1112** or **visit their website at [www.hud.gov](http://www.hud.gov)**.

If you are a recipient of TANF cash assistance, whether a child-only or a family grant, you may be eligible for additional financial assistance for your housing needs. The **Additional Requirements for Emergent Needs (AREN) program** provides up to \$750 in a twelve month period to help with emergency housing needs, such as to prevent eviction or a utilities shut-off. To find out more about the AREN program, **contact your local DSHS Community Service Office**.

## Know Your Housing Rights

- Federal law does not require grandparents and other relatives to have legal custody or guardianship of the children they are raising to qualify for federal housing programs.
- Children are allowed in Section 202 (“Senior”) housing.
- Although HUD regulations limit senior housing units to two bedrooms, families cannot be evicted until an appropriate alternative has been found.
- The Fair Housing Amendments Act of 1988 prohibits discrimination based on “family status” in the private housing market. “Family status” includes the presence of a minor child. Seniors-only housing is allowed under special circumstances.

## Benefits CheckUp for Federal, State and Local Programs

BenefitsCheckUp (BCU) is the nation’s most comprehensive online service to screen for federal, state and some local public and private benefits for adults ages 55 and over. For example, BCU helps thousands of people every day to connect to programs that can help them pay for prescription drugs, health care, utilities, and other needs. In addition, BCU also provides a detailed description of the



programs, contacts for additional information and materials to help successfully apply for each service. Specific resources have been included on the BCU for **Grandparents and Relatives Raising Children website which can be accessed at: [www.adsa.dshs.wa.gov](http://www.adsa.dshs.wa.gov)**, click on the “Benefits” topic.

## Dealing with Social Service Agencies - A Few Tips

- Be patient. You may encounter long waits on the phone or in person. Many agencies do not have the staff to take your calls immediately. You may call programs that have automated answering systems or answering machines.
- Save time when applying for any type of benefits by calling first and getting a list of all the information and papers you’ll need. Ask how long you may have to wait, so you can schedule your time.
- Call during low volume phone times. Agencies differ by the volume and type of calls they receive. It is often easier to get through to agency help lines during the early morning hours on Tuesday through Thursday. The busiest phone times appear to be during lunch hours (11:00 am – 1:00 pm) and on Mondays and Fridays.
- Keep a log. Always write down the name, title, and phone number of the person, to whom you speak, and the name, address, and business hours of the agency. Record the time and date of your call or visit and important details of your conversation for future reference (see below).
- If you make an appointment with an agency, plan to arrive 15 minutes before your meeting to fill out any forms they might need. Once the appointment is over, ask what the next step in the process will be and how soon you can expect a decision.
- It’s hard to get into some services. Keep trying or ask for another place to try for a similar service.
- Work cooperatively with your caseworker. If difficulties arise that you cannot settle with your caseworker, ask to speak with the worker’s supervisor.
- If need be, file a grievance. Most agencies have a grievance (complaint) procedure for handling difficult situations.
- Navigating the system can be exhausting and time consuming. Take a break to recharge yourself or ask for help.

Each social service agency you deal with will likely have different requirements and processes, so you should expect to provide various kinds of information when you first apply. To make the process as smooth as possible, prepare a list of questions before you contact an organization. A sample list is shown below. Record the questions and the information you receive in a notebook so you can refer to it in the future.



**A typical conversation might begin something like this:**

“Hello, I would like some information about programs that can help me provide my child with some assistance with X.” (Replace the “X” with the types of assistance you need, such as help with meals, medical care, or transportation, etc.) “Can you please answer some questions for me?”

## **Sample Questions When Contacting a Social Service Agency**

- What types of services do you provide?
- How can I receive an application?
- If I cannot complete the application by myself, can someone at your agency help me?
- What documents will you need to verify my identity? (Driver’s License, Social Security Card, etc.)
- What documents will you need to verify my level of income? (Paycheck stubs, pension forms, Social Security check stubs, etc.)
- If I don’t have the proof I need to verify my identity or income, can I provide them to you later?
- If I don’t have the documents, can someone at your agency help me get them?
- What documents will you need to verify my child’s identity? (Birth certificate, social Security card, etc.)
- Once I have completed the application, will I need to schedule an appointment to meet with someone so they can review it?

## **Kinship Navigators**

Sometimes relatives feel overwhelmed by the array of service providers, the complexity of agencies or just don’t know where to start. Washington State is fortunate to have a growing network of local kinship care navigators whose job it is to help caregivers “navigate” their way through the system.

**To find a Kinship Navigator** who can help direct you to resources in your area, **call 1-800-422-3263 or visit the Relatives as Parents website at <http://parenting.wsu.edu/relative/index.htm>**. Click on “Support Groups and Kinship Navigators” and then on “Find a Support Group or Kinship Navigator in your county”. At this time, kinship navigators do not serve all areas of the state.

## SECTION VI

## Native American Community Resources

This is a general resource guide for all relative caregivers in Washington State. We have not attempted to address the specific needs of particular racial, ethnic, or other groups. However, because of the special legal status of Native American tribes and the prevalence of relative care within Native American communities, the following information is included.



Native Americans are a legal class of individuals who have U.S. citizenship and are enrolled or eligible for enrollment in an Indian tribe. If the child in your care is of Indian descent, they may be eligible for services from their tribe or tribal organizations. Services may include Indian Health care, Indian Child Welfare services, tribal court services, and other referrals that may help meet the needs of the caregiver or child.

Tribes are sovereign governments and have the same protections and structure as other state and federal government programs. Tribal programs may include law enforcement, social or family services, tribal court, health clinics, and tribal schools. Tribal courts may have different capacities, depending on the individual family and youth codes within their jurisdiction. Tribal social services programs are also resources for children and their caregivers, depending on the structure of their programs and the amount of resources available. They can also be contacts for information and referral.

The Governor's Office of Indian Affairs (GOIA) publishes a Washington State Tribal Directory that includes a listing of all federally-recognized and non-recognized tribes in Washington State, including programs, locations, phone numbers, and contact names. The Directory also includes Washington State

Tribal Liaison Contact lists, Indian organizations, tribal schools, and tribal clinics. **GOIA can be contacted by phone at 360-753-2411 or by email at [goia@goia.wa.gov](mailto:goia@goia.wa.gov).** The Washington State Tribal Directory is **available on-line through the GOIA website at [www.goia.wa.gov](http://www.goia.wa.gov).**

## **Tribal TANF Programs**

Several federally recognized tribes in Washington operate their own federally funded TANF programs offering services to tribal members, Native Americans and other eligible participants in their regions. If the child you care for is eligible for membership in a federally recognized tribe, and your residence is within the program service area of a Tribal TANF Program, you may be eligible for services from one of these programs. For a list and contact information for Tribal TANF Programs, **contact DSHS State Tribal Relations Unit at 360-725-4660 or visit the ACF Division of Tribal Services Website at [http://www.acf.hhs.gov/programs/dts/ttanfcont\\_1002.htm](http://www.acf.hhs.gov/programs/dts/ttanfcont_1002.htm).**

## **Tribal Child Support Programs**

Several Tribes in Washington and around the country operate federally funded Tribal Child Support Programs that you and your child may benefit from. These programs provide similar child support services as those of State child support programs but often the process is based on tribal culture, practices, and standards. To obtain more information about these programs, **contact DSHS State Tribal Relations Unit at 360-725-4660 or visit their website at [www.dshs.wa.gov/dcs/tribal](http://www.dshs.wa.gov/dcs/tribal).**

**The Indian Health Service (IHS)**, an agency within the federal Department of Health and Human Services, is responsible for providing federal health services to American Indians and Alaska Natives. These services grew out of the special relationship the federal government has with Indian Tribes. The goal of IHS is to raise the health status of all Indian people to the highest possible level. If the child you are caring for is a member of an Indian Tribe or may be eligible for membership, he or she may also be eligible for medical care through an IHS clinic. To find a clinic, **call the Portland Area Office at 503-326-2020 or check the HIS website at [www.ihs.gov/FacilitiesServices/AreaOffices/Portland](http://www.ihs.gov/FacilitiesServices/AreaOffices/Portland).**

**The National Indian Child Welfare Association** provides technical assistance, a library, conference, workshops, laws and information. **Contact them at 1-503-222-4044 or visit the website at [www.nicwa.org](http://www.nicwa.org).**

*“What are my legal rights as a grandparent raising my grandchild?” “Can I adopt my niece?” “Can I keep my brother from seeing his son?” “Do I really need a lawyer?”*

These and many other questions may be running through your head. For many people, the legal issues are the most difficult of all the challenges relatives face.

Legal and court systems are expensive, can often be difficult to understand, and take an emotional toll on everyone involved.



## Legal Resources

We could not do justice to the multitude of legal issues involving relatives as caregivers in a few pages. The **Northwest Women’s Law Center** has developed a guide, *Grandparents and Other Non-parental Caregivers: Adoption, Dependency Guardianship, Non-Parental Custody and Temporary Agreement*. It was updated in 2004. This resource can provide invaluable information.

If you are a relative involved in a legal situation regarding raising a child, you may be able to obtain a complimentary copy of their legal guide. **Call the Northwest Women’s Law Center’s Information and Referral at 206-621-7691 to request your copy.** If you are not involved in related legal matters but would like to purchase a copy of the *Guide*, **call 206-682-9552.** The Northwest Women’s Law Center also offers free memos and self-help packets on a variety of legal issues facing people with limited income. **If you would like to borrow a copy of the Legal Guide, contact the RAPP Resource Library at 1-800-422-3263 or by e-mailing [hauptp@dshs.wa.gov](mailto:hauptp@dshs.wa.gov).**

## Family Court Facilitators

Most county superior courts have instituted a program using Family Court Facilitators who assist individuals who have no attorney to represent them in completing form documents and filing papers in family court actions in that county. These cases are called “pro se”. Contact your County’s Superior Court or the Court Clerk’s office to request information. The facilitators do not give legal advice but simply explain the forms and procedures to be followed.

Some of the services the Family Court Facilitators provide include:

- referral to legal, social service or alternative dispute resolution services;
- assisting in calculating child support amounts based on financial information from both parties;
- processing requests for interpreters;
- explanation of legal terms;
- information on basic court procedures;
- reviewing completed forms and pleadings;
- attending “pro se” hearings to assist court with pro se matters;
- offering “do it yourself” family law kits for sale with forms and instructions.

You can **find a listing of the court facilitators at** [\*\*http://www.courts.wa.gov/court\\_dir/\*\*](http://www.courts.wa.gov/court_dir/).

## Finding a Lawyer

Decisions you make about legal issues are very important and a lawyer can help you understand what your options and risks are and how your choices will affect your family.

Look for a family law attorney who has experience in guardianship and adoption. Ask for recommendations from friends. If you are in a support group, they may have names of attorneys who regularly work with kinship care legal issues. It’s important that you find someone you can talk to and who seems right for your situation in order for you to work as a team. If you are struggling with other legal problems, such as drafting a will to protect your assets for your grandchild, or receiving TANF, Social Security, or other public benefits, **call the Northwest Women’s Law Center or CLEAR** (see below).

The **Northwest Women’s Law Center** provides free legal information and referral services. The Center has a current list of attorneys in many areas of practice and in many counties in Washington. The Center can give you a general idea of the attorney’s fees, but each client will need to negotiate specific fees with the attorney. You can reach the **Northwest Women’s Law Center at 206-621-7691** or **at their website at <http://www.nwwlc.org>**.

**Coordinated Legal Education Advice and Referral (CLEAR) and CLEAR Senior** are programs of the Northwest Justice Project, which help low-income people in Washington with legal information and referrals. CLEAR Senior is a similar service for anyone who is 60 years or older regardless of income level. CLEAR and CLEAR Senior staff will listen to your story, glean the underlying legal issues, and offer self-help advice with informational brochures such as *Filing a Non-parental Custody Action*. In limited cases, staff will refer you to an attorney for further assistance. CLEAR Senior staff may also be able to refer seniors to local social service agencies for other resources in their communities.

All CLEAR services are available in any county in Washington, except King County. King County residents may only receive CLEAR services for mobile home and public assistance fair hearing matters. **Call CLEAR at 1-888-201-1014 or 1-888-201-9737 (TTY). CLEAR Senior can be accessed at 1-888-387-7111.** Both programs operate between 9:30 am and 12:30 pm Monday through Friday and Tuesdays from 4 pm to 6:30 pm.

There may be long waits to reach a staff person by phone. The attorney answering the telephone will ask questions about your income, assets, and expenses (not for CLEAR Senior) and other personal information before beginning the consultation. **You can also visit the Northwest Justice Project website at <http://www.nwjustice.org>.**

For other King County legal problems, **call Northwest Justice Project at 206-464-1519 or Columbia Legal Services at 206-464-5911.**

**The Attorney Referral Service at 1-800-759-4357 and the County Bar Association Lawyer Referral Services** can also refer you to an appropriate attorney in your area. Look in your phone book for the nearest Bar Association.

**The National Academy of Elder Law Attorneys (NAELA)** is a nonprofit association that assists lawyers and others who work with older clients and their families. The NAELA website offers a national directory of member attorneys. **Contact them at 520-881-4005 or visit the website at [www.naela.org](http://www.naela.org).**

**Kinship Care Solutions** is a program where volunteer attorneys assist low-income caregivers who want to file nonparental custody actions. You must be a King County case or resident. Contact the **King County Bar Association Lawyer Referral at 206-267-7010 or [cls@kcba.org](mailto:cls@kcba.org).**



## Paternity Establishment

Emotional and financial support from both parents gives a child the foundation for a good life. The child you are caring for is entitled to financial support from his/her father when legal paternity has been established. Every child has a father, but not every father is a legal father. When the parents aren't married, the "father" has limited rights and responsibilities. To become a legal father with all of the rights and responsibilities, the man must establish paternity.

Below are some good reasons for establishing paternity:

- the child has a right to know and to be loved by both parents as well as all of his grandparents.
- the child can get child support money when legal paternity is established.
- the child may need medical information and medical history from the father's family to have a better chance at a health life.
- establishing paternity makes it possible for the child to claim Social Security, pensions, Veteran's benefits, life insurance and inheritance rights.
- though the child's father may not be able to pay child support currently, someday he may be able to provide support.

Washington State has laws and procedures for establishing "parentage" which is what paternity is called in Washington law. Sometimes County Prosecuting

Attorneys will initiate an action for parentage at no cost to you on behalf of your child when the child is receiving public benefits. The Northwest Women's Law Center is another good source of information and referrals for establishing parentage. You can reach the **Northwest Women's Law Center at 206-621-7691 or at their website at <http://www.nwwlc.org>.**

Washington also has a process for acknowledging paternity voluntarily by signing a paternity affidavit. This is frequently done at the hospital shortly

after the birth of a child. However paternity affidavits can be signed at anytime. To learn more about acknowledging paternity contact the **Child Support Help Line at 1-800-457-6202 or visit the DCS website at <http://www1.dshs.wa.gov/dcs/services.shtml>.**



## Negotiation and Mediation

Thinking about a court order makes many people imagine nasty courtroom battles and lots of yelling and blaming. While this is a common fear, in most cases the parents and the relative find a way to agree. It's always better to work out a plan that is in the best interest of the child, through:

- Negotiation – your lawyer can talk to the parents' lawyers, or you can all sit down together with the lawyers and work out a plan; or through
- Mediation – you and the parents sit down together with a person trained to help people, such as a family mediator or therapist, and work out an agreement to resolve the conflict.

### Mediation

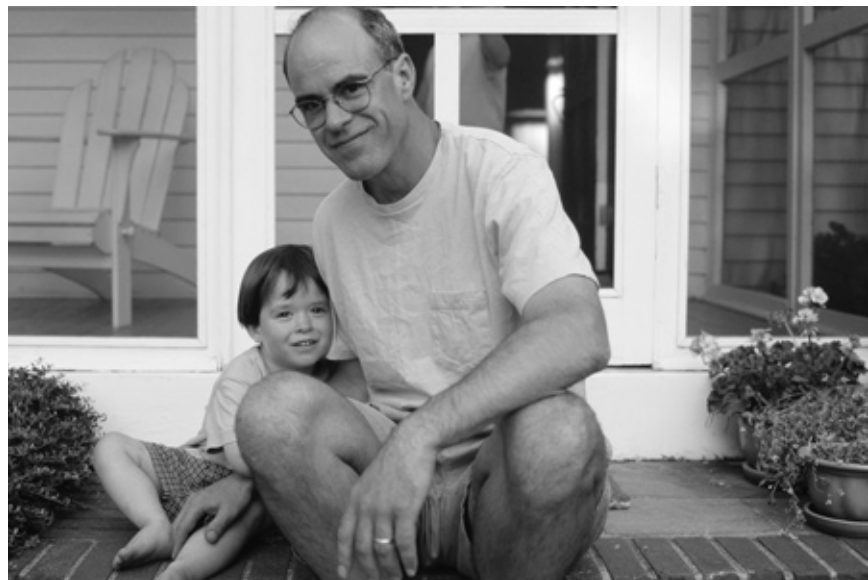
Mediation is a way to negotiate solutions to disputes. A trained mediator creates a safe place and helps with communication among the people involved. The mediator makes sure each person has a chance to be heard, shows respect for each one's feelings and values, and explores workable solutions to the disagreements. Both parties need to be willing to prepare and actively participate in the mediation. If the parties reach an agreement, the mediator will put that agreement in writing. The parties may then have their own attorneys review the agreement and put it in a legal form.

Mediation is voluntary. Both parties must agree to mediation and both must be satisfied for agreement to be reached. Mediation is also confidential. Information shared during the mediation cannot be used later in court or in an administrative hearing (exceptions are threats of violence and unreported abuse).

You can mediate at any time – before going to court, during a court case, or even after a court case is over. For example, you can mediate to clarify a final parenting plan. If no agreement is reached, you can still use the courts. If part of the disagreement is solved, you will have that much less to take to court.

Mediation is less costly than going to court – in terms of money, time, and emotions.

Many Washington State counties have Dispute Resolution Centers that provide mediation at no or low cost. Mediators in private practice generally charge \$50 to \$180 an hour, depending on the type of case and the family income. Sometimes there is an additional administrative fee.



To find the nearest Dispute Resolution Center (DRC), **call the Snohomish/Island County DRC at 1-800-280-4770**. Staff can direct you to one of the DRCs that offer mediation services. You can also find a list of all the DRCs at **[www.resolutionwa.org](http://www.resolutionwa.org)**. You can also look in the White Pages of your phone directory under “mediator” or “mediation service”.

Just as with attorneys, it is best to use a referral service to find a private mediator trained in family law, if possible. You may call the **Northwest Women’s Law Center Information and Referral Line at 206-621-7691** for a referral to mediators in some areas of the state.

To learn more about mediation you may be interested in a 10 minute video entitled “*Mediation for Kinship Caregivers: An alternative to the Courtroom*”. This short video shows how mediation can be a win-win situation for all parties involved. To borrow a free loan copy or to purchase the video, **contact 360-725-2556** or **visit the RAPP website at <http://parenting.wsu.edu/relative/index.htm>** and click on “Legal Resources”.

## Obtaining Needed Papers and Documents

*Sam didn’t have any records for his nephew. Kyle came to him with one suitcase, two pairs of jeans, three tee shirts, some underwear, and a pair of tennis shoes. How was he going to enroll him in school without a birth certificate, social security card, or immunization records?*

You are going to need certain documents and papers in order to apply for certain services.

### Birth Certificates

Birth certificates can be obtained by contacting the **Washington State Department of Health, Center for Health Statistics at 360-236-4300** or **visiting their website at [www.doh.wa.gov](http://www.doh.wa.gov)**. You can also contact the Vital Records office or similar office in the state where the child was born. The following information is usually needed:

- name of the child;
- date of birth;
- place of birth – city, county, and hospital;
- parents’ names as they appear on the birth certificate;
- mother’s maiden name;
- request signed by the person making the request;
- your name, address, and phone number.

There are usually fees to obtain birth certificates and most other documents. Check with the Vital Statistics office for any fees and for which forms of payment are accepted.

## Social Security Cards

It is not necessary to be the child's legal guardian in order to obtain a Social Security card for them. Use Form SS-5 (Application for Social Security Card) to request either an original Social Security number or a replacement card. The form includes instructions for completing the application and discusses the documents that must be submitted with it. U.S. citizens need an original or a certified copy of their birth certificate or a baptismal record.

For information on obtaining a Social Security card, **call the Social Security Administration General Information Line at 1-800-772-1213**. You can also access Form SS-5 on **their website at [www.ssa.gov/online/ss-5.html](http://www.ssa.gov/online/ss-5.html)** or **visit your local Social Security office**.

## Medical Records

If you haven't been a primary caregiver for your child since birth, you may not have all the medical records. Try to get them from the birth parents. If they don't have them, ask them to sign a medical consent to have the records released to the doctor or clinic that now provides health care to your child. You might also want to ask the pediatrician's office, your primary physician, or health clinic to help you get the records. If your child has been enrolled in school, they may be able to provide you with a copy of the immunization record in their files.

To help a doctor "reconstruct" your child's medical history, start by making a list of all the illnesses and conditions you can verify that your child has had. Also, list any information regarding the medical history of the birth parents, including any medical conditions, substance abuse, or mental health problems the mother may have experienced during pregnancy.

## Consent to Health Care for the Child in Your Care

A new law, Substitute House Bill 1281, passed in 2005 by the Washington State legislature allows kinship caregivers to consent to health care for a child when the parents are not available - even if he/she does not have legal custody. As a kinship caregiver, you may consent to health care for a minor child if you:

- have a signed authorization from the child's parent to make health care decisions for the child;
- are a relative responsible for the health care of the child; or
- are a relative caregiver who has signed and dated a declaration (RCW 7.70.065).



### ***Information about a declaration***

A declaration is a dated and signed written document that states certain information is true. As an adult kinship caregiver, you can sign a declaration saying you are a relative responsible for the health care of the minor child.

Although a signed declaration is not required under the law, health care providers may require it. A sample declaration is listed on the next page or can be downloaded off the internet at **[www.washingtonlawhelp.org](http://www.washingtonlawhelp.org)**. You may use this sample form or write a declaration of your own.

Keep in mind a declaration is “under the penalty of perjury under the laws of the state of Washington”. Signing a declaration that you know to be false is a Class B felony.

A declaration is only good for six months from the date that signed. After six months, the declaration expires. You must then fill out and sign another declaration.

Signing the declaration only allows you to consent to health care for the child. The declaration has no effect on legal custody of the child or the legal rights of the parents.

### ***Other documentation may be needed***

Under the new law, a provider may ask for proof that shows you are responsible for the child’s health care. If this happens, the following items may be useful:

1. A will that lists your relationship to the child.
2. A letter from a social worker, school personnel, a lawyer, religious leader, or a licensed medical, mental health, or behavioral professional that shows your relationship to the child.
3. Records from a school, hospital, clinic, or other public health or social service agency that shows your relationship to the child.
4. Proof that you receive a public benefit, such as TANF, SSI, medical coupons, food stamps, or free/reduced school lunch on behalf of the child.
5. Records from the Department of Social and Health Services that show that you are the contact for the child.
6. Proof that a child lives in your apartment or other housing and is related to you.
7. Insurance for you or the child that states your relationship.
8. Your Federal Income Tax return in which the child was listed.
9. Any other documents that show your relationship with the child and indicate that you are the caregiver for that child.



### ***Where you can go for more information***

There are several organizations that offer free information and referrals over the phone and/or information on the internet.

Contact:

- **The Coordinated Legal Education, Advice and Referral (CLEAR).** If you are under 60 and low-income, **call 1-888-201-1014\*\***. If you are over 60 at any income level, **call CLEAR\* Sr toll-free at 1-888-387-7111. Or visit their website at: [http://www.nwjustice.org/about\\_njp/clear.html](http://www.nwjustice.org/about_njp/clear.html).**

\*\* not available in King County. Call 206-464-1519 for information and referral.

- You can download a sample of the declaration at [www.washingtonlawhelp.org](http://www.washingtonlawhelp.org).
- The Northwest Women's Law Center at 206-621-7692 (for both women and men) or visit the website at <http://www.nwwlc.org/>.

## **SAMPLE**

### **Kinship Caregiver's Declaration of Responsibility for a Minor's Health Care**

I Declare That:

#### **Minor's Information:**

1. I consent to health care for the child: \_\_\_\_\_.  
(print name of the child)

2. The child's date of birth is: \_\_\_\_\_.

#### **Caregiver's Information:**

3. My name is: \_\_\_\_\_.(print your name)

4. My home address is: \_\_\_\_\_

5. I am 18 years of age or older and I am a relative responsible for the health care of the minor.

6. My date of birth is: \_\_\_\_\_.

7. I am the \_\_\_\_\_ of the minor.  
(print your relationship to the child, e.g. grandparent, aunt/uncle, etc.)

I declare under penalty of perjury under the laws of the State of Washington that the above is true and correct.

Date: \_\_\_\_\_ City and State: \_\_\_\_\_

Signature of Caregiver: \_\_\_\_\_



## Keeping Documentation

For a variety of reasons, it is advisable to keep records on issues related to the children in your care.

### What to Document

- Have the children's doctor and dentist make notes in the medical file, such as, "Child brought in by grandparent".
- Keep a file with bills and receipts for medical expenses you pay.
- Ask the child's teacher to note in the education file such information as, "School conference attended by grandparent."
- Keep a file with receipts for school clothes and educational expenses you incur.
- Document all lessons (piano, karate, ballet, etc.) for which you pay.
- Keep receipts for groceries, rent, and anything that contributes to the child's care.
- Keep a journal of the parents' involvement, or lack thereof, with the child.
- Record important events.
- You may wish to keep a journal on a tape recorder.

### Journaling Tips

- Use a bound journal rather than a loose-leaf notebook.
- Write the date of each entry.
- Note when parents visit and what happens during each visit.
- Log when parents telephone their children and comment on the children's reaction.
- Log phone calls by the parent to you. Does the parent ask about the child?
- Record the parent's behavior when they visit or call.
- Note the parents' broken promises.
- Include photographs of family events and list who participates.
- Write about the child's behavior before, during, and after a parental visit.
- Document what the parent doesn't do; for example, when they don't remember a birthday or holiday.
- Attach receipts of everything you buy for the child.
- Write what you observe when a child comes back from a parental visit; i.e., any bruises, resumption of bed-wetting or thumb sucking, etc.
- Record what the child says about a visit with the parent.

## Legal Options in Washington State

On the following page is a chart that briefly outlines formal and informal placement arrangements for children being raised by relatives in Washington State. This chart was designed for information purposes only. Before you decide to pursue any given option, we recommend that you seek the council of a family law attorney. Refer to the section on legal representation earlier in this chapter.

A new video, *Legal Options for Grandparents and Relatives Raising Children in Washington State*, showcases a presentation by Rebecca Morrow, former Kinship Legal Fellow with Columbia Legal Services. The video lasts for 1 hour 25 minutes. Copies of the video can be obtained by **contacting the Relatives as Parents Program, 1-800-422-3263 (360-725-2556 in Olympia), e-mailing [hauptp@dshs.wa.gov](mailto:hauptp@dshs.wa.gov) or by contacting a local kinship support group.**

# LEGAL OPTIONS FOR RELATIVES RAISING CHILDREN IN WASHINGTON STATE

Parental Consent Agreement		Legal Guardianship		Dependency Guardianship		Non-Parental or Third Party		Adoption	
Voluntary – requires consent by parents		Takes place in Superior Court or Family Court		Used only in Dependency proceeding		Takes place in Family Court or Superior Court		Takes place in Family Court or Superior Court	
No court action required		Gives an authorized adult authority over the finances & personal care of a minor		Legal arrangement (DSHS Placement) can continue to age 18		May include a temporary order while case is pending.		Must prove parents are unfit or they must relinquish parental rights	
Arrangements can be flexible		Guardian is granted similar authority as parent with some exceptions		Grants the same rights of parents to the guardian, with some exceptions		Gives an authorized adult authority over the finances & personal care of a minor. Also establishes placement/ custody		Parental rights are terminated but if open adoption, contact may continue with parents, siblings, extended family	
Parents can cancel agreement at any time		Unless parents consent, court may appoint guardian ad Litem to investigate & determine if guardian is suitable		Only initiated by a party to Dependency Proceedings		Must prove living with parents is detrimental to child, or by mutual agreement		Child no longer eligible for birth parents' inheritance or SS, but can receive from adoptive parents	
May receive DSHS and tax benefits		Does not terminate parental rights		Court may include ongoing DSHS services		Guardian ad Litem may be appointed		Attorney representation strongly recommended. Adoption support may be available.	
May be adequate for obtaining medical, childcare, & education needs for child in care		May be changed or ended by court order		If no ongoing DSHS services = less oversight by agency & court		Must be approved by Juvenile Court if Dependency case, but is not part of a Dependency action		Foster care & child-only TANF benefits end	
May receive child-only grant through TANF		Does not interfere with inheritance of parents' or grandparents' assets		May or may not terminate parental rights		May establish parenting plan for child to include visitation and service requirements for parents		Adoptive tax benefits and adoption subsidies may be available to adoptive parents	
		Requires brief reports to court		TANF, Foster Care & tax benefits may be available					
		May receive child – Only grant through TANF				TANF and tax benefits may be available			

## Taking Care of You

One of the best ways you can help yourself and your child through tough times is to take care of yourself, both physically and mentally. Eat right, get plenty of rest and regular exercise, and see your doctor regularly. Talk to your doctor about any physical, mental, or emotional problems you are experiencing.



Perhaps you, your spouse, or another family member is experiencing a health condition that requires long-term care services. If you are in need of information regarding what is available, you can contact one or more of the following resources:

- **Aging and Disability Services/DSHS at 1-800-422-3263 or [www.adsa.dshs.wa.gov](http://www.adsa.dshs.wa.gov) to locate the Senior Information and Assistance (I&A) Office** or the **Home and Community Services Office/DSHS** nearest to you. Senior I&A staff are knowledgeable about in-home, community, and residential services, Family Caregiver Support Programs, the cost of services, and whom to contact about them. Home and Community Service offices have staff that can complete an assessment of service needs and can assist in the decision about appropriate services.
- **The Family Help Line at 1-800-932-4673** is a statewide, toll-free phone service for parents and caregivers. The Family Help Line provides information about parenting, child development and positive discipline, coaching for parents who need help to deal with their children's negative behaviors, a safe place to talk about parenting concerns and receive immediate support, printed materials that can be mailed to parents free of charge, and referrals to community services in all 39 counties of Washington State.
- The **Eldercare Locator at 1-800-677-1116** will put you in touch with aging and long-term care services around the country.
- The **National Alliance for Caregiving at [www.caregiving.org](http://www.caregiving.org)** connects families with information on caregiver resources and local services.

## Relatives as Parents Support Groups

*Rosemarie was nervous about going to her first support group meeting. Shy at first about speaking up in the group, she just sat and listened. Within the first five minutes she began to hear that others were in similar situations. Finally, she had found a place where people understood what she was going through.*

Relative caregivers commonly report that they feel alone in their struggles. They may lose touch with old friends who don't have the same caregiving responsibilities. They may no longer have the time and energy to stay active in their community. This sense of isolation can become overwhelming for some kinship caregivers, making it even more difficult to care properly for themselves and for the children they are raising.

A support group allows participants to share their personal experiences with others who are in similar situations and are experiencing the same types of issues. A support group can provide a productive way to accept and “work through” problems as a group and make the participants feel less alone in their struggles. In a sense, a support group can serve as a kind of “extended family” for kinship caregivers, sometimes leading to friendships that may outlast the group itself.

The number of support groups for relatives raising children is increasing. Most counties in Washington State now have one or more such groups. Many of them offer childcare so that both the relative and their child have a chance to socialize. For many, support groups offer relatives the only respite from their parenting duties.

### How Support Groups Can Help

- offers emotional support to caregivers who feel alone and isolated
- creates a network of caregivers who are in the same situation
- offers guidance, assistance, and feedback to relatives in their efforts to care for their child
- gives ideas on creative, positive solutions to difficult and challenging problems
- serves as a connection to resources and information
- offers a safe, understanding place to discuss the emotional ups and downs of raising a relative
- provides tools for advocacy on the issues one faces raising a relative's child

To locate the nearest **Relatives as Parents support group** in your area, **visit the Relatives as Parents Program (RAPP) website at <http://parenting.wsu.edu/relative/index.htm>** or **call the Family Help Line.**

If there is no support group in your area, **contact 360-725-2556** or **write to [hauptp@dshs.wa.gov](mailto:hauptp@dshs.wa.gov)** for advice on how to start one. The RAPP website listed above has tips on starting and maintaining a support group. Click on “Support Groups – Services and Resources.”

## Respite Services

Respite is temporary, short-term care for a person or persons with a disability or a chronic or terminal illness. Respite provides relief to caregivers from the demands of on-going care for individuals with special needs. You, or someone you know, may need respite if he or she is caring for adults or children with a physical or developmental disability, a chronic or terminal condition requiring ongoing care and supervision, Alzheimer's disease or related disorders, medical fragility, or individuals at risk for abuse or neglect.

To help you find respite, **call the National Respite Locator Service at 919-490-5577** or **visit their website at <http://www.respitelocator.org>**. If you live in King County you can obtain information about county-wide resources in the *Respite and Crisis Care Coalition of Washington (RCCCWA) Resource Guide*. The *RCCCWA Guide* is available to download at The Arc of King County **website at <http://www.arcofkingcounty.org/respite>**.

Statewide Respite Care Services are available to unpaid primary caregivers who provide care and/or supervision to adults age eighteen and over with a functional disability, through Washington State's Area Agencies on Aging. In several areas around the state, grand-parents and other relatives over the age of 60 can access respite care services through a new program called the **Family Caregiver Support Program**. Contact the nearest **Senior I&A** office to learn more about available respite services. To find the local office **call 1-800-422-3263** or **go to <http://www.adsa.dshs.wa.gov/>** and click on Area Agencies on Aging in Your Community.



For respite care services for caregivers of children with disabilities, you can also call **Easter Seal Society of Washington at 253-884-2722 in Tacoma** or at **509-326-8292 in Spokane** or **visit their website at [www.seals.org](http://www.seals.org)** and click on "Camping and Respite." They provide respite weekends twice monthly and a residential camp during summer months.

You can also **call the Answers for Special Kids (ASK) Line toll-free at 1-800-322-2588**, for other resources. Other people, including your doctor, church or synagogue, employer, neighbors, and family may be able to assist you in finding respite care. You can also call Children's Resource Line for summer camps and programs for children with special needs at **1-866-987-2500 press 4**.



## Coping With Challenging Emotions

It's natural to feel sad and angry. You're watching a child you love struggle with loss and pain, and it hurts you to see it. Your life has changed drastically too, and you may miss having time for your own friends and interests. "I was always the hardworking one, with goals for my life," said one woman angrily, "while my sister was out partying. Now she's still living the high life, and I'm changing her kids' diapers."

You may also worry a lot. A grandfather, raising the children of his crack-addicted daughter, spoke with sadness in his voice: "Sometimes at night, I hear a siren or a woman screaming. I wonder if it is my daughter in trouble out there. I try to do my best for the little ones, but I'm scared for them, too."

At times, you hurt so much it seems you just can't bear it. Yet even the most painful feelings fade with time. You can talk them out with others. You can pray or take quiet moments to relax. You may find comfort from a support group, counseling, or other services discussed in this book.

Much as they hurt, painful feelings won't break you. Try to be patient, and remember that the worst of the pain will pass with time. You may also start feeling better when you see progress. As the children do better in your care, you'll feel pride and relief.

### Stress Busters

Whatever you do, don't forget to take care of yourself! When new children enter a household, it's common for apprehension to mount. Stress-related health problems may start or get worse. You can help keep it from happening to you and stay strong for your family by taking care of yourself now using the tips below.

- Make your health your first priority. See your doctor regularly and follow his/her advice.
- Create a regular "quiet hour" in your household, whether it's naptime for infants or stereo (with earphones) for teens.
- Take time to nurture yourself.
- Take the child places that are restful for you. A library, park, or public pool can be nice, as long as they're not too crowded.
- Practice patience. Let others in your family do as much for themselves as possible.
- Look for local activities where the children will be safe and you can enjoy time apart. Libraries, community centers, 4-H Clubs, YMCA, YWCA, Boys and Girls Clubs, Big Brothers and Sisters, Mentoring Programs, Girl Scouts and Boy Scouts, all may have programs, many of them free or low cost.
- Do something you enjoy.

- Since you probably have not had to “parent” for a while, you may find it useful to look into parenting classes to learn different methods for helping children develop self-esteem, confidence, accountability, and responsibility.
- Start a co-op with other parents or caregivers and trade watching each other’s children for a couple of hours weekly.
- Keep a sense of humor.
- Join a support group.
- Lower your standards (for a clean house, for perfect manners).
- Talk with friends, family members, or a counselor.
- Consider your religious community and personal faith for strength and assistance. Contact your church, synagogue, or tribe for help its members can provide.
- Learn to say NO.
- Reward yourself.

## **Know Your Limits**

We all have times when we wish we could fix everything that’s causing pain to those we love. You may wish you could provide the perfect loving home, which would make all the children’s problems magically disappear. The truth is that you can’t, and neither can anyone else. You can, however, help a lot, by remembering:

- You can’t keep a child in your family from feeling sad or acting angry. You can offer care and understanding, and help find counseling if needed.
- You can’t erase a history of pain and abuse for a child. You can provide a safe, nurturing home for them to heal.
- You can’t make a child a better student overnight. You can help with homework, read together, limit television, and work with the child’s school to discover other learning opportunities.
- You can’t make the child’s parents get better. You can suggest drug treatment or other services you think might help, and encourage them if they go.
- You can’t do everything right, any more than any parent can. You can get services and support to help you do your best with all the challenges.
- You can’t assume you will always be able to cope, and sometimes you may need professional help to remain healthy and supported. You can contact mental health professionals in your community if you feel you need extra support.

## A. Community Services in Washington State

The numbers listed below are for general information and may refer you to a local resource:

AARP Grandparent Information Center .....	888-687-2277
AARP Tax Aide Program .....	888-227-7669
Access to Baby & Child Dentistry Program (ABCD).....	800-562-3022
Adoption Support Program/DSHS.....	800-562-5682
Aging and Disability Services Administration/DSHS .....	800-422-3263
Alcohol/Drug 24 Hour Helpline (Teen Line) .....	800-562-1240
ARC of Washington State .....	888-754-8798
ASK (Answers for Special Kids) Line .....	800-322-2588
At Risk/Runaway Youth Program/Drug and Alcohol/DSHS .....	360-438-8079
Attorney Referral Service.....	800-759-4357
Basic Health Plan for Washington .....	800-826-2444
Birth Certificates, WA State Dept. of Health .....	360-236-4300
Child Abuse and Neglect (End Harm) .....	866-363-4276
Child Care Resource and Referral Services (WA State) .....	800-446-1114
Child Nutrition Program/OSPI .....	360-725-6200
Child Support Help Line .....	800-457-6202
Children's Resource Line .....	866-987-2500 #4
Children with Special Health Care Needs .....	800-322-2588
CLEAR Legal Education, Advice, and Referral Line (Washington) .....	888-201-1014
CLEAR Senior .....	888-387-7111
Community Service Offices (CSO)/DSHS.....	800-865-7801
DSHS Constituent Line - Information and Referral.....	800-737-0617
Dispute Resolution Center/Snohomish-Island Counties.....	800-280-4770
Division of Developmental Disabilities/DSHS.....	360-902-8444
Early Head Start National Resource Center.....	202-638-1144
Easter Seal Society of Washington/Tacoma office.....	253-884-2722
Spokane office .....	509-326-8292
Eldercare Locator.....	800-677-1116
Emergency Services .....	911

Families for Kids Recruitment Resources .....	888-794-1794
Family Food Line .....	888-436-6392
Family Help Line.....	800-932-4673
Fetal Alcohol Syndrome Diagnostic and Prevention Network .....	206-685-9888
Healthy Mothers, Healthy Babies Information and Referral Line .....	800-322-2588
Infant Toddler Early Intervention Program (ITEIP) .....	800-322-2588
Internal Revenue Service (IRS) .....	800-829-1040
Kinship Caregivers Support Program (for local AAA number) .....	800-422-3263
Kinship Navigators (for local numbers) .....	800-422-3263
Learning Disabilities Association of WA State .....	425-882-0792
Legislative Hotline.....	800-562-6000
Mediation in Special Education/Sound Options Group .....	800-692-2540
Medical Assistance Customer Service Center/DSHS .....	800-562-3022
Mental Health Division/ADSA/DSHS, Office of Consumer Affairs.....	800-446-0259
Mental Health Division Parenting Advocate .....	800-446-0259 #3
Mental Health Helpline-NAMI Greater Seattle.....	800-782-9264
National Center for Grieving Children & Families .....	503-775-5683
National Indian Child Welfare Association .....	503-222-4044
National Youth Violence Prevention Resource Center.....	866-723-3968
Northwest Justice Project .....	206-464-1519
Northwest Women’s Law Center Information & Referral.....	206-621-7691
Office of the Family and Children’s Ombudsman (OFCO) .....	800-571-7321
Office of the Superintendent of Public Instruction (OSPI).....	360-725-6000
Parent to Parent Support Program .....	800-821-5927
Parents are Vital In Education (PAVE) .....	800-572-7368
Planned Parenthood.....	800-230-7526
Poison Information Center .....	800-732-6985
Relatives as Parents (RAPP) Support Groups (for local number).....	800-422-3263
Respite Care Locator (National) .....	919-490-5577 #222
Safety Restraint Coalition .....	800-282-5587
Social Security Administration/General Information Line .....	800-772-1213
State Children’s Health Insurance Program (SCHIP).....	877-543-7669
Statewide Action for Family Empowerment (SAFE) .....	866-300-1998
Statewide Health Insurance Benefits Advisors (SHIBA).....	800-397-4422
Team Child .....	206-322-2444
Washington Poison Center .....	800-732-6985
Washington State Operator .....	800-321-2808
Women, Infants, and Children Nutrition Program (WIC) .....	800-841-1410

## **B. National Resources for Relatives as Parents**

### **AARP - Grandparent Information Center**

601 “E” Street NW, Washington, DC 20049

Phone: 1-888-687-2277, Email: [gic@aarp.org](mailto:gic@aarp.org)

Website: [www.aarp.org/confacts/programs/gic.html](http://www.aarp.org/confacts/programs/gic.html)

The Grandparent Information Center (GIC) offers a variety of information about being a good grandparent, visitation rights, and raising grandchildren. Grandparents can access tip sheets and a free newsletter on topics including raising grandchildren, starting support groups, and addressing their educational needs.

### **The Brookdale Foundation Group**

950 Third Avenue, 19th Floor, New York, NY 10022

Phone: (212) 308-7355, FAX: (212) 750-0132

Website: [www.brookdalefoundation.org](http://www.brookdalefoundation.org)

The Brookdale Relatives As Parents Program (RAPP) provides seed grants to support local and state agencies serving grandparents and other relatives who are raising children.

### **Children of Alcoholics Foundation (COAF) – Ties That Bind Project**

164 West 74th Street, New York, NY 10023

Phone: (212) 595-5810

Website: [www.coaf.org/family/caregivers/kinmain.htm](http://www.coaf.org/family/caregivers/kinmain.htm)

COAF provides tips for relatives who have taken over the care of a child when parents’ drug or alcohol use has left them unable to care for their children.

Suggestions, tips and strategies are available in the following areas: talking about alcohol and drugs with children, dealing with the substance abusing parent, coping with children’s behavioral problems, dealing with caregiver’s own feelings, and facts/myths about substance abuse.

### **Children’s Defense Fund (CDF)**

25 “E” Street NW, Washington, DC 20001

Phone: (202) 628-8787, Email: [childwelfare@childrensdefense.org](mailto:childwelfare@childrensdefense.org)

Website: [www.childrensdefense.org](http://www.childrensdefense.org)

The Children’s Defense Fund (CDF) provides a voice for all children of America who cannot vote, lobby, or speak for themselves. CDF provides information on the latest issues facing grandparents and other relatives’ caregivers. A list of CDF’s publications for kinship caregivers and those professionals who work with them can be found at the end of this guide. All publications are accessible on CDF’s website.

### **Child Welfare League of America**

440 First Street, N.W., 3rd Floor Washington, DC 20001-2085

Phone: (202) 638-2952

Website: <http://www.cwla.org/programs/kinship/default.htm>

The Child Welfare League of America (CWLA) is an association of public and nonprofit child welfare agencies. CWLA offers tips on parenting, discipline, and child development. In addition to advocating for kinship care families on the national level, CWLA offers a bi-annual national conference that focuses exclusively on kinship care issues.

### **Generations United**

1333 H Street, N.W., Suite 500 W Washington, DC 20005

Phone: (202) 289-3979, Email: [gu@gu.org](mailto:gu@gu.org)

Website: [www.gu.org](http://www.gu.org)

Generations United (GU) supports a National Center on Grandparents and Other Relatives Raising Children, which seeks to improve the quality of life of these caregivers and the children they are raising. The website provides information including overviews of current innovative kinship care programs, updates on federal and state legislation, legal options, housing, public benefits, and links to additional kinship care resources.

### **GrandsPlace**

154 Cottage Rd., Enfield CT 06082

Phone: (860) 763-5789

Website: [www.grandsplace.com](http://www.grandsplace.com)

GrandsPlace offers a website for grandparents and others raising children to allow them to communicate with one another online. The website offers words of wisdom, information on grandparents' rights and benefits, a state-by-state directory of grandparent support groups, games and craft ideas, and a place to add photographs. Grandparents can sign up for a free bimonthly email newsletter.

### **National Aging Information Center – U.S. Administration on Aging**

U.S. Health & Human Services

330 Independence Avenue, S.W. Washington, DC 20201

Phone: (202) 619-0724

Website: [www.aoa.dhhs.gov](http://www.aoa.dhhs.gov)

The center offers a listing of helpful books and resources for grandparents and other older individuals raising grandchildren. The website also provides contact information for each state's Department on Aging, so kinship caregivers can find support programs and services near them. Information also may be requested by phone.

### **National Committee of Grandparents for Children's Rights (NCGCR)**

Phone/Fax (866) 624-9900, Email: [bcastellano@grandparentsforchildren.org](mailto:bcastellano@grandparentsforchildren.org)

Website: [www.grandparentsforchildren.org](http://www.grandparentsforchildren.org)

The NCGCR is a coalition of concerned grandparents, citizens and agencies united to create one powerful voice and to network with groups throughout the nation. The mission is to protect the rights of grandparents to secure their grandchildren's health, happiness and well-being.



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## Kinship Navigators

Sometimes relatives feel overwhelmed by the array of service providers, the complexity of agencies or just don't know where to start. Washington State is fortunate to have a growing network of local kinship care navigators whose job it is to help caregivers "navigate" their way through the system.

**To find a Kinship Navigator** who can help direct you to resources in your area, **call 1-800-422-3263 or visit the Relatives as Parents website at <http://parenting.wsu.edu/relative/index.htm>**. Click on "Support Groups and Kinship Navigators" and then on "Find a Support Group or Kinship Navigator in your county". At this time, kinship navigators do not serve all areas of the state.

## Washington State's Relatives as Parents Program

The Washington State Relatives as Parents Program (RAPP) was created in 1998 through a grant received from the Brookdale Foundation. Activities include:

- RAPP Website: <http://parenting.wsu.edu/relative/index.htm>;
- Native Kinship Care Initiative: Grant to work with 12 Tribes on resources and services;
- RAPP Training: Parenting the Second Time Around, Train the Trainer two-day training;
- Annual Kinship Care Awards-poetry and essay contests, certificates and awards, co-sponsor
- RAPP Video Productions:
  - *Grandparents Raising Grandchildren*;
  - *Mediation for Kinship Caregivers: An Alternative to the Courtroom*; and
  - *Legal Options for Grandparents and Relatives Raising Children in Washington State*
- RAPP Resource Library: videos, books, support group and professional curricula;
- Public Education: Presentations at international, national, state and local conferences;
- RAPP Resource Materials: Resource Guide and handouts available;
- RAPP Coalition and RAPP Support Groups: Updates on legislation, funding, services and resources;
- RAPP State Support Group Database: updated and posted; and
- Contributor: AARP Grandparent Information Center, Newsletter Advisory Council, Generations United, Expert Trainer, Washington State Kinship Oversight Committee, and the DSHS Kinship Care Task Force.

For more information: 1-800-422-3263 (or 360-725-2556) or [haupthp@dshs.wa.gov](mailto:haupthp@dshs.wa.gov).

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